

Fill in this information to identify your case:

United States Bankruptcy Court for the:

Eastern District of Michigan

Case number (If known): \_\_\_\_\_ Chapter you are filing under:



Chapter 7



Chapter 11



Chapter 12



Chapter 13

☐ Check if this is an amended filing

## Official Form 101

# Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use *you* and *Debtor 1* to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint* case—and in joint cases, these forms use *you* to ask for information from both debtors. For example, if a form asks, “Do you own a car,” the answer would be *yes* if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

### Part 1: Identify Yourself

#### About Debtor 1:

#### About Debtor 2 (Spouse Only in a Joint Case):

##### 1. Your full name

Write the name that is on your government-issued picture identification (for example, your driver's license or passport).

Bring your picture identification to your meeting with the trustee.

Jamie

First name

Christine

Middle name

Denunzio

Last name

\_\_\_\_\_  
Suffix (Sr., Jr, II, III)

\_\_\_\_\_  
First name

\_\_\_\_\_  
Middle name

\_\_\_\_\_  
Last name

\_\_\_\_\_  
Suffix (Sr., Jr, II, III)

##### 2. All other names you have used in the last 8 years

Include your married or maiden names.

Jamie

First name

C.

Middle name

McKenzie

Last name

Jamie

First name

\_\_\_\_\_  
Middle name

Huntington

Last name

\_\_\_\_\_  
First name

\_\_\_\_\_  
Middle name

\_\_\_\_\_  
Last name

\_\_\_\_\_  
First name

\_\_\_\_\_  
Middle name

\_\_\_\_\_  
Last name

##### 3. Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)

xxx - xx - 3 8 8 5

OR

9xx - xx - \_\_\_\_ \_\_\_\_ \_\_\_\_ \_\_\_\_

xxx - xx - \_\_\_\_ \_\_\_\_ \_\_\_\_ \_\_\_\_

OR

9xx - xx - \_\_\_\_ \_\_\_\_ \_\_\_\_ \_\_\_\_

4. Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years

Include trade names and *doing business* as names

About Debtor 1:

☒ I have not used any business names or EINs.

Business name

Business name

EIN

EIN

About Debtor 2 (Spouse Only in a Joint Case):

☐ I have not used any business names or EINs.

Business name

Business name

EIN

EIN

5. Where you live

46 Bluebird Hill Dr

Number

Street

Orion, MI 48359-1807

City

State

ZIP Code

Oakland

County

If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.

Number

Street

P.O. Box

City

State

ZIP Code

If Debtor 2 lives at a different address:

Number

Street

City

State

ZIP Code

County

If Debtor 2's mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.

Number

Street

P.O. Box

City

State

ZIP Code

6. Why you are choosing this district to file for bankruptcy

Check one:

☒ Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.

☐ I have another reason. Explain. (See 28 U.S.C. § 1408)

Check one:

☐ Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.

☐ I have another reason. Explain. (See 28 U.S.C. § 1408)

Official Form 101

20-41208-mlo

Doc 1

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Voluntary Petition for Individuals Filing for Bankruptcy

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**Part 2:** Tell the Court About Your Bankruptcy Case

**7. The chapter of the Bankruptcy Code you are choosing to file under**

Check one. (For a brief description of each, see *Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy* (Form B2010)). Also, go to the top of page 1 and check the appropriate box.

- ☒ Chapter 7  
☐ Chapter 11  
☐ Chapter 12  
☐ Chapter 13

**8. How you will pay the fee**

- ☐ **I will pay the entire fee when I file my petition.** Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address.
- ☐ **I need to pay the fee in installments.** If you choose this option, sign and attach the *Application for Individuals to Pay Your Filing Fee in Installments* (Official Form 103A).
- ☒ **I request that my fee be waived** (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the *Application to Have the Chapter 7 Filing Fee Waived* (Official Form 103B) and file it with your petition.

**9. Have you filed for bankruptcy within the last 8 years?**

- ☒ No.
- ☐ Yes. District \_\_\_\_\_ When \_\_\_\_\_ Case number \_\_\_\_\_  
MM / DD / YYYY
- District \_\_\_\_\_ When \_\_\_\_\_ Case number \_\_\_\_\_  
MM / DD / YYYY
- District \_\_\_\_\_ When \_\_\_\_\_ Case number \_\_\_\_\_  
MM / DD / YYYY

**10. Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?**

- ☒ No.
- ☐ Yes. Debtor \_\_\_\_\_ Relationship to you \_\_\_\_\_  
District \_\_\_\_\_ When \_\_\_\_\_ Case number, if known \_\_\_\_\_  
MM / DD / YYYY
- Debtor \_\_\_\_\_ Relationship to you \_\_\_\_\_  
District \_\_\_\_\_ When \_\_\_\_\_ Case number, if known \_\_\_\_\_  
MM / DD / YYYY

**11. Do you rent your residence?**

- ☒ No. Go to line 12.
- ☐ Yes. Has your landlord obtained an eviction judgment against you?
- ☐ No. Go to line 12.
- ☐ Yes. Fill out *Initial Statement About an Eviction Judgment Against You* (Form 101A) and file it as part of this bankruptcy petition.

**Part 3: Report About Any Businesses You Own as a Sole Proprietor****12. Are you a sole proprietor of any full- or part-time business?**

A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.

If you have more than one sole proprietorship, use a separate sheet and attach it to this petition.



No. Go to Part 4.



Yes. Name and location of business

Name of business, if any \_\_\_\_\_

Number \_\_\_\_\_ Street \_\_\_\_\_

City \_\_\_\_\_

State \_\_\_\_\_

ZIP Code \_\_\_\_\_

Check the appropriate box to describe your business:



Health Care Business (as defined in 11 U.S.C. § 101(27A))



Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))



Stockbroker (as defined in 11 U.S.C. § 101(53A))



Commodity Broker (as defined in 11 U.S.C. § 101(6))



None of the above

**13. Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?**

For a definition of *small business debtor*, see 11 U.S.C. § 101(51D).



No. I am not filing under Chapter 11.



No. I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code.



Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code.

*If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate deadlines.* If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B).

**Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention****14. Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety? Or do you own any property that needs immediate attention?**

*For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?*



No.



Yes. What is the hazard? \_\_\_\_\_

If immediate attention is needed, why is it needed? \_\_\_\_\_

Where is the property? \_\_\_\_\_

Number \_\_\_\_\_ Street \_\_\_\_\_

City \_\_\_\_\_

State \_\_\_\_\_

ZIP Code \_\_\_\_\_

**Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling****15. Tell the court whether you have received a briefing about credit counseling.**

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

**About Debtor 1:**

*You must check one:*

- ☒ **I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.**

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

- ☐ **I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.**

Within 14 days after you file this bankruptcy petition, you **MUST** file a copy of the certificate and payment plan, if any.

- ☐ **I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.**

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file.

You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

- ☐ **I am not required to receive a briefing about credit counseling because of:**

☐ **Incapacity.** I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ **Disability.** My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ **Active duty.** I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

**About Debtor 2 (Spouse Only in a Joint Case):**

*You must check one:*

- ☐ **I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.**

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

- ☐ **I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.**

Within 14 days after you file this bankruptcy petition, you **MUST** file a copy of the certificate and payment plan, if any.

- ☐ **I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.**

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- ☐ **I am not required to receive a briefing about credit counseling because of:**

☐ **Incapacity.** I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ **Disability.** My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ **Active duty.** I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

**Part 6:** Answer These Questions for Reporting Purposes**16. What kind of debts do you have?**

**16a. Are your debts primarily consumer debts?** *Consumer debts* are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

☐ No. Go to line 16b.

☒ Yes. Go to line 17.

**16b. Are your debts primarily business debts?** *Business debts* are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment.

☐ No. Go to line 16c.

☐ Yes. Go to line 17.

**16c.** State the type of debts you owe that are not consumer debts or business debts.

**17. Are you filing under Chapter 7?**

☐ No. I am not filing under Chapter 7. Go to line 18.

**Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors?**

☒ Yes. I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available to distribute to unsecured creditors?

☒ No

☐ Yes

**18. How many creditors do you estimate that you owe?**

1-49



1,000-5,000



25,001-50,000



50,000-100,000



More than 100,000



50-99



5,001-10,000



100-199



10,001-25,000



200-999

**19. How much do you estimate your assets to be worth?**

\$0-\$50,000



\$1,000,001-\$10 million



\$500,000,001-\$1 billion



\$50,001-\$100,000



\$10,000,001-\$50 million



\$1,000,000,001-\$10 billion



\$100,001-\$500,000



\$50,000,001-\$100 million



\$10,000,000,001-\$50 billion



\$500,001-\$1 million



\$100,000,001-\$500 million



More than \$50 billion

**20. How much do you estimate your liabilities to be?**

\$0-\$50,000



\$1,000,001-\$10 million



\$500,000,001-\$1 billion



\$50,001-\$100,000



\$10,000,001-\$50 million



\$1,000,000,001-\$10 billion



\$100,001-\$500,000



\$50,000,001-\$100 million



\$10,000,000,001-\$50 billion



\$500,001-\$1 million



\$100,000,001-\$500 million



More than \$50 billion

**Part 7:** Sign Below**For you**

I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct.

If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11, 12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7.

If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).

I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.

I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

**X**

**/s/ Jamie Christine Denunzio**

Jamie Christine Denunzio, Debtor 1

Executed on 01/26/2020

MM/ DD/ YYYY

Debtor 1

Jamie

First Name

Christine

Middle Name

Denunzio

Last Name

Case number (if known) \_\_\_\_\_

**For your attorney, if you are represented by one**

**If you are not represented by an attorney, you do not need to file this page.**

I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

**X**

/s/ Lashonda S. Bourgeois-Lewis

Lashonda S. Bourgeois-Lewis, Attorney

Date 01/26/2020

MM / DD / YYYY

Lashonda S. Bourgeois-Lewis

Printed name

Lewis Law, PLLC

Firm name

PO Box 775

Number Street

Clarkston

City

MI

State

48346

ZIP Code

Contact phone (248) 785-3780

Email address Lashonda@LashondaLewisLaw.com

P63214

Bar number

MI

State

Fill in this information to identify your case and this filing:

Debtor 1	<u>Jamie</u>	<u>Christine</u>	<u>Denunzio</u>
	First Name	Middle Name	Last Name
<hr/>			
Debtor 2			
(Spouse, if filing)	First Name	Middle Name	Last Name
<hr/>			
United States Bankruptcy Court for the:	<u>Eastern District of Michigan</u>		
Case number	<hr/>		

☐ Check if this is an amended filing

## Official Form 106A/B

### Schedule A/B: Property

12/15

In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

#### Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In

1. Do you own or have any legal or equitable interest in any residence, building, land, or similar property?

☐ No. Go to Part 2.

☒ Yes. Where is the property?

1.1 1974 Elcona double wide

Street address, if available, or other description

46 Bluebird Hill Dr

Orion, MI 48359-1807

City State ZIP Code

Oakland

County

What is the property? Check all that apply.

- ☐ Single-family home  
☐ Duplex or multi-unit building  
☐ Condominium or cooperative  
☒ Manufactured or mobile home  
☐ Land  
☐ Investment property  
☐ Timeshare  
☐ Other \_\_\_\_\_

Who has an interest in the property? Check one.

- ☐ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☒ At least one of the debtors and another

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

Current value of the entire property?  
\$500.00

Current value of the portion you own?  
\$250.00

Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known.

Homestead

☐ Check if this is community property (see instructions)

2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages you have attached for Part 1. Write that number here.....

→ \$250.00



**Part 2: Describe Your Vehicles**

**Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not?** Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on *Schedule G: Executory Contracts and Unexpired Leases*.

**3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles**

- ☐ No  
☒ Yes

3.1 Make: Buick  
 Model: Lesabre  
 Year: 2000  
 Approximate mileage: 190000  
 Other information:

**Who has an interest in the property?** Check one.

- ☒ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another

☐ **Check if this is community property** (see instructions)

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

**Current value of the entire property?**  
\$300.00

**Current value of the portion you own?**  
\$300.00

If you own or have more than one, list here:

3.2 Make: Dodge  
 Model: Ram  
 Year: 1997  
 Approximate mileage: 189000  
 Other information:

**Who has an interest in the property?** Check one.

- ☒ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another

☐ **Check if this is community property** (see instructions)

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

**Current value of the entire property?**  
\$271.00

**Current value of the portion you own?**  
\$271.00

**4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories**

*Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories*

- ☒ No  
☐ Yes

Make: \_\_\_\_\_  
 Model: \_\_\_\_\_  
 Year: \_\_\_\_\_  
 Other information:

**Who has an interest in the property?** Check one.

- ☐ Debtor 1 only  
☐ Debtor 2 only  
☐ Debtor 1 and Debtor 2 only  
☐ At least one of the debtors and another

☐ **Check if this is community property** (see instructions)

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

**Current value of the entire property?**  
 \_\_\_\_\_

**Current value of the portion you own?**  
 \_\_\_\_\_

**5. Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for pages you have attached for Part 2. Write that number here.....**

→ \$571.00

Part 3: Describe Your Personal and Household Items

Do you own or have any legal or equitable interest in any of the following items?		Current value of the portion you own? Do not deduct secured claims or exemptions.
<div>6. Household goods and furnishings</div> <div>Examples: Major appliances, furniture, linens, china, kitchenware</div> <div> <input type="checkbox"/> No <div>Sofa, lamps, kitchen appliances, washer &amp; dryer, kitchen items, bed</div> </div> <div> <input checked="" type="checkbox"/> Yes. Describe..... <div> <div></div> <div>\$500.00</div> </div> </div>		
<div>7. Electronics</div> <div>Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games</div> <div> <input type="checkbox"/> No <div>cellular telephones, televisions, DVD player</div> </div> <div> <input checked="" type="checkbox"/> Yes. Describe..... <div> <div></div> <div>\$285.00</div> </div> </div>		
<div>8. Collectibles of value</div> <div>Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles</div> <div> <input checked="" type="checkbox"/> No <div></div> </div> <div> <input type="checkbox"/> Yes. Describe..... <div> <div></div> <div></div> </div> </div>		
<div>9. Equipment for sports and hobbies</div> <div>Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments</div> <div> <input checked="" type="checkbox"/> No <div></div> </div> <div> <input type="checkbox"/> Yes. Describe..... <div> <div></div> <div></div> </div> </div>		
<div>10. Firearms</div> <div>Examples: Pistols, rifles, shotguns, ammunition, and related equipment</div> <div> <input checked="" type="checkbox"/> No <div></div> </div> <div> <input type="checkbox"/> Yes. Describe..... <div> <div></div> <div></div> </div> </div>		
<div>11. Clothes</div> <div>Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories</div> <div> <input type="checkbox"/> No <div></div> </div> <div> <input checked="" type="checkbox"/> Yes. Describe..... <div> <div></div> <div>\$150.00</div> </div> </div>		
<div>12. Jewelry</div> <div>Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver</div> <div> <input type="checkbox"/> No <div>costume jewelry</div> </div> <div> <input checked="" type="checkbox"/> Yes. Describe..... <div> <div></div> <div>\$50.00</div> </div> </div>		

13. Non-farm animals

Examples: Dogs, cats, birds, horses

☐ No
 ☒ Yes. Describe.....
 

Mini fox terrior

\$50.00

14. Any other personal and household items you did not already list, including any health aids you did not list

☒ No
 ☐ Yes. Describe.....

15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached for Part 3. Write that number here..... →

\$1,035.00

Part 4: Describe Your Financial Assets

Do you own or have any legal or equitable interest in any of the following?

Current value of the portion you own? Do not deduct secured claims or exemptions.

16. Cash

Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition

☐ No
 ☒ Yes..... Cash.....
 

\$3.00

17. Deposits of money

Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each.

☐ No
 ☒ Yes.....
 

Institution name:

17.1. Checking account: Huntington bank

\$0.00

17.2. Checking account: Chase

\$0.00

17.3. Savings account: Huntington

\$0.99

17.4. Savings account:

17.5. Certificates of deposit:

17.6. Other financial account:

17.7. Other financial account:

17.8. Other financial account: \_\_\_\_\_

17.9. Other financial account: \_\_\_\_\_

18. Bonds, mutual funds, or publicly traded stocks

Examples: Bond funds, investment accounts with brokerage firms, money market accounts

- ☒ No
- ☐ Yes.....

Institution or issuer name: \_\_\_\_\_

19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture

- ☒ No
- ☐ Yes. Give specific information about them.....

Name of entity: \_\_\_\_\_

% of ownership: \_\_\_\_\_

20. Government and corporate bonds and other negotiable and non-negotiable instruments

Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them.

- ☒ No
- ☐ Yes. Give specific information about them.....

Issuer name: \_\_\_\_\_

21. Retirement or pension accounts

Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans

- ☒ No
- ☐ Yes. List each account separately.

Type of account: \_\_\_\_\_ Institution name: \_\_\_\_\_

401(k) or similar plan: \_\_\_\_\_

Pension plan: \_\_\_\_\_

IRA: \_\_\_\_\_

Retirement account: \_\_\_\_\_

Keogh: \_\_\_\_\_

Additional account: \_\_\_\_\_

22. Security deposits and prepayments

Your share of all unused deposits you have made so that you may continue service or use from a company  
Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others

- ☒ No
- ☐ Yes.....

Institution name or individual:

Electric: \_\_\_\_\_

Gas: \_\_\_\_\_

Heating oil: \_\_\_\_\_

Security deposit on rental unit: \_\_\_\_\_

Prepaid rent: \_\_\_\_\_

Telephone: \_\_\_\_\_

Water: \_\_\_\_\_

Rented furniture: \_\_\_\_\_

Other: \_\_\_\_\_

23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years)

- ☒ No
- ☐ Yes.....

Issuer name and description:  
\_\_\_\_\_

24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program.

26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1).

- ☒ No
- ☐ Yes.....

Institution name and description. Separately file the records of any interests. 11 U.S.C. § 521(c):  
\_\_\_\_\_

25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit

☒ No
 ☐ Yes. Give specific information about them....

26. Patents, copyrights, trademarks, trade secrets, and other intellectual property

*Examples:* Internet domain names, websites, proceeds from royalties and licensing agreements

☒ No
 ☐ Yes. Give specific information about them....

27. Licenses, franchises, and other general intangibles

*Examples:* Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses

☒ No
 ☐ Yes. Give specific information about them....

Money or property owed to you?

Current value of the portion you own?  
Do not deduct secured claims or exemptions.

28. Tax refunds owed to you

☐ No
 ☒ Yes. Give specific information about them, including whether you already filed the returns and the tax years.....

See Attached.

Federal:

State:

Local:

\$3,791.50

\$137.50

29. Family support

*Examples:* Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement

☐ No
 ☒ Yes. Give specific information.....

Child Support week of filing

Alimony:

Maintenance:

Support:

Divorce settlement:

Property settlement:

\$140.00

30. Other amounts someone owes you

*Examples:* Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else

☒ No
 ☐ Yes. Give specific information.....

31. **Interests in insurance policies**

*Examples:* Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance

☒ No
 

☐ Yes. Name the insurance company of each policy and list its value....
 Company name:
 Beneficiary:
 Surrender or refund value:

32. **Any interest in property that is due you from someone who has died**

If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died.

☒ No
 

☐ Yes. Give specific information.....

33. **Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment**

*Examples:* Accidents, employment disputes, insurance claims, or rights to sue

☒ No
 

☐ Yes. Describe each claim.....

34. **Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims**

☒ No
 

☐ Yes. Describe each claim.....

35. **Any financial assets you did not already list**

☒ No
 

☐ Yes. Give specific information.....

36. **Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached for Part 4. Write that number here.....**

→

\$4,072.99

**Part 5:** Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1.

37. **Do you own or have any legal or equitable interest in any business-related property?**

☒ No. Go to Part 6.
 

☐ Yes. Go to line 38.

**Current value of the portion you own?**  
 Do not deduct secured claims or exemptions.

38. **Accounts receivable or commissions you already earned**

☒ No
 ☐ Yes. Describe.....

39. **Office equipment, furnishings, and supplies**

*Examples:* Business-related computers, software, modems, printers, copiers, fax machines, rugs, telephones, desks, chairs, electronic devices

☒ No
 ☐ Yes. Describe.....

40. **Machinery, fixtures, equipment, supplies you use in business, and tools of your trade**

☒ No
 ☐ Yes. Describe.....

41. **Inventory**

☒ No
 ☐ Yes. Describe.....

42. **Interests in partnerships or joint ventures**

☒ No
 ☐ Yes. Describe.....

Name of entity:

% of ownership:

43. **Customer lists, mailing lists, or other compilations**

☒ No
 ☐ Yes. **Do your lists include personally identifiable information** (as defined in 11 U.S.C. § 101(41A))?

☒ No
 ☐ Yes. Describe.....

44. **Any business-related property you did not already list**

☒ No
 ☐ Yes. Give specific information.....

45. **Add the dollar value of all of your entries from Part 5, including any entries for pages you have attached for Part 5. Write that number here.**

\$0.00

Part 6:

Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In.

If you own or have an interest in farmland, list it in Part 1.

46. **Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?**

☒ No. Go to Part 7.
 ☐ Yes. Go to line 47.



Current value of the portion you own?

Do not deduct secured claims or exemptions.

47. Farm animals

Examples: Livestock, poultry, farm-raised fish

☒ No
 ☐ Yes.....

48. Crops—either growing or harvested

☒ No
 ☐ Yes. Give specific information.....

49. Farm and fishing equipment, implements, machinery, fixtures, and tools of trade

☒ No
 ☐ Yes.....

50. Farm and fishing supplies, chemicals, and feed

☒ No
 ☐ Yes.....

51. Any farm- and commercial fishing-related property you did not already list

☒ No
 ☐ Yes. Give specific information.....

52. Add the dollar value of all of your entries from Part 6, including any entries for pages you have attached for Part 6. Write that number here.....→

\$0.00

Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above

53. Do you have other property of any kind you did not already list?

Examples: Season tickets, country club membership

☒ No
 ☐ Yes. Give specific information.....

54. Add the dollar value of all of your entries from Part 7. Write that number here.....→

\$0.00

Part 8: List the Totals of Each Part of this Form

55. Part 1: Total real estate, line 2.....→

\$250.00

56.

Part 2: Total vehicles, line 5

\$571.00

57.

Part 3: Total personal and household items, line 15

\$1,035.00

58.

Part 4: Total financial assets, line 36

\$4,072.99

59.

Part 5: Total business-related property, line 45

\$0.00

60.

Part 6: Total farm- and fishing-related property, line 52

\$0.00

61.

Part 7: Total other property not listed, line 54

+

\$0.00

62.

Total personal property. Add lines 56 through 61.....

\$5,678.99

Copy personal property total →

+

\$5,678.99

63.

Total of all property on Schedule A/B. Add line 55 + line 62.....

\$5,928.99

Debtor 1

Jamie

First Name

Christine

Middle Name

Denunzio

Last Name

Case number (if known) \_\_\_\_\_

## SCHEDULE A/B: PROPERTY

### Continuation Page

28. **Tax refunds owed to you**

Federal:	<u>2019   Anticipated</u>	<u>\$3,500.00</u>
Federal:	<u>2020   Accrued</u>	<u>\$291.50</u>
State:	<u>2019   Anticipated</u>	<u>\$125.00</u>
State:	<u>2020   Accrued</u>	<u>\$12.50</u>

Fill in this information to identify your case:

Debtor 1 Jamie Christine Denunzio  
First Name Middle Name Last Name

Debtor 2 \_\_\_\_\_  
(Spouse, if filing) First Name Middle Name Last Name

United States Bankruptcy Court for the: Eastern District of Michigan

Case number \_\_\_\_\_  
(if known)

☐ Check if this is an amended filing

## Official Form 106C

### Schedule C: The Property You Claim as Exempt

04/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

#### Part 1: Identify the Property You Claim as Exempt

1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.

- ☐ You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
- ☒ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)

2. For any property you list on *Schedule A/B* that you claim as exempt, fill in the information below.

Brief description of the property and line on <i>Schedule A/B</i> that lists this property	Current value of the portion you own Copy the value from <i>Schedule A/B</i>	Amount of the exemption you claim <i>Check only one box for each exemption.</i>	Specific laws that allow exemption
Brief description: 1974 Elcona double wide 46 Bluebird Hill Dr Orion, MI 48359-1807  Line from <i>Schedule A/B</i> : <u>1.1</u>	<u>\$250.00</u>	<input checked="" type="checkbox"/> \$250.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(1) _____ _____
Brief description: 2000 Buick Lesabre  Line from <i>Schedule A/B</i> : <u>3.1</u>	<u>\$300.00</u>	<input checked="" type="checkbox"/> \$300.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(5) _____ _____

3. Are you claiming a homestead exemption of more than \$170,350?

(Subject to adjustment on 4/01/22 and every 3 years after that for cases filed on or after the date of adjustment.)

- ☒ No
- ☐ Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?
- ☐ No
- ☐ Yes

Debtor 1      Jamie      Christine      Denunzio  
 First Name      Middle Name      Last Name

Case number (if known) \_\_\_\_\_

**Part 2:** Additional Page

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own <small>Copy the value from Schedule A/B</small>	Amount of the exemption you claim <small>Check only one box for each exemption.</small>	Specific laws that allow exemption
Brief description: 1997 Dodge Ram  Line from Schedule A/B: <u>3.2</u>	\$271.00	<input checked="" type="checkbox"/> \$271.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(2) _____ _____
Brief description: Sofa, lamps, kitchen appliances, washer & dryer, kitchen items, bed  Line from Schedule A/B: <u>6</u>	\$500.00	<input checked="" type="checkbox"/> \$500.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(3) _____ _____
Brief description: cellular telephones, televisions, DVD player  Line from Schedule A/B: <u>7</u>	\$285.00	<input checked="" type="checkbox"/> \$285.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(3) _____ _____
Brief description: Clothes  Line from Schedule A/B: <u>11</u>	\$150.00	<input checked="" type="checkbox"/> \$150.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(3) _____ _____
Brief description: costume jewelry  Line from Schedule A/B: <u>12</u>	\$50.00	<input checked="" type="checkbox"/> \$50.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(4) _____ _____
Brief description: Mini fox terrior  Line from Schedule A/B: <u>13</u>	\$50.00	<input checked="" type="checkbox"/> \$50.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(5) _____ _____
Brief description: Cash  Line from Schedule A/B: <u>16</u>	\$3.00	<input checked="" type="checkbox"/> \$3.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(5) _____ _____
Brief description: Huntington bank Checking account  Line from Schedule A/B: <u>17</u>	\$0.00	<input checked="" type="checkbox"/> \$0.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(5) _____ _____

Debtor 1      Jamie      Christine      Denunzio  
 First Name      Middle Name      Last Name

Case number (if known) \_\_\_\_\_

**Part 2:** Additional Page

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own <small>Copy the value from Schedule A/B</small>	Amount of the exemption you claim <small>Check only one box for each exemption.</small>	Specific laws that allow exemption
Brief description: Chase Checking account  Line from Schedule A/B: <u>17</u>	<u>\$0.00</u>	<input checked="" type="checkbox"/> <u>\$0.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<u>11 U.S.C. § 522(d)(5)</u> _____ _____
Brief description: Huntington Savings account  Line from Schedule A/B: <u>17</u>	<u>\$0.99</u>	<input checked="" type="checkbox"/> <u>\$0.99</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<u>11 U.S.C. § 522(d)(5)</u> _____ _____
Brief description: Anticipated Federal tax  Line from Schedule A/B: <u>28</u>	<u>\$3,500.00</u>	<input checked="" type="checkbox"/> <u>\$3,500.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<u>11 U.S.C. § 522(d)(5)</u> _____ _____
Brief description: Accrued Federal tax  Line from Schedule A/B: <u>28</u>	<u>\$291.50</u>	<input checked="" type="checkbox"/> <u>\$291.50</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<u>11 U.S.C. § 522(d)(5)</u> _____ _____
Brief description: Anticipated State tax  Line from Schedule A/B: <u>28</u>	<u>\$125.00</u>	<input checked="" type="checkbox"/> <u>\$125.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<u>11 U.S.C. § 522(d)(5)</u> _____ _____
Brief description: Accrued State tax  Line from Schedule A/B: <u>28</u>	<u>\$12.50</u>	<input checked="" type="checkbox"/> <u>\$12.50</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<u>11 U.S.C. § 522(d)(5)</u> _____ _____
Brief description: Child Support week of filing Support  Line from Schedule A/B: <u>29</u>	<u>\$140.00</u>	<input checked="" type="checkbox"/> <u>\$140.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<u>11 U.S.C. § 522(d)(10)(D)</u> _____ _____

Fill in this information to identify your case:

Debtor 1                      Jamie                      Christine                      Denunzio  
First Name                      Middle Name                      Last Name

Debtor 2  
(Spouse, if filing)                      \_\_\_\_\_  
First Name                      Middle Name                      Last Name

United States Bankruptcy Court for the:                      Eastern District of Michigan

Case number  
(if known)                      \_\_\_\_\_

☐ Check if this is an amended filing

## Official Form 106D

### Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

#### 1. Do any creditors have claims secured by your property?

- ☒ No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
- ☐ Yes. Fill in all of the information below.

#### Part 1: List All Secured Claims

2. **List all secured claims.** If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As much as possible, list the claims in alphabetical order according to the creditor's name.

Column A	Column B	Column C
Amount of claim	Value of collateral that supports this claim	Unsecured portion
Do not deduct the value of collateral.		If any

2.1 Describe the property that secures the claim:

Creditor's Name

Number Street

City State ZIP Code

**Who owes the debt?** Check one.

- ☐ Debtor 1 only
- ☐ Debtor 2 only
- ☐ Debtor 1 and Debtor 2 only
- ☐ At least one of the debtors and another
- ☐ Check if this claim relates to a community debt

Date debt was incurred

**As of the date you file, the claim is:** Check all that apply.

- ☐ Contingent
- ☐ Unliquidated
- ☐ Disputed
- Nature of lien.** Check all that apply.
- ☐ An agreement you made (such as mortgage or secured car loan)
- ☐ Statutory lien (such as tax lien, mechanic's lien)
- ☐ Judgment lien from a lawsuit
- ☐ Other (including a right to offset)

Last 4 digits of account number \_\_\_\_\_

Add the dollar value of your entries in Column A on this page. Write that number here:

\$0.00

Debtor 1      Jamie      Christine      Denunzio  
First Name      Middle Name      Last Name

Case number (if known) \_\_\_\_\_

Part 1:	Additional Page After listing any entries on this page, number them beginning with 2.3, followed by 2.4, and so forth.	Column A	Column B	Column C	
		Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion If any	
2.2	<p>Creditor's Name _____</p> <p>Number _____ Street _____</p> <p>City _____ State _____ ZIP Code _____</p> <p><b>Who owes the debt?</b> Check one.</p> <p><input type="checkbox"/> Debtor 1 only</p> <p><input type="checkbox"/> Debtor 2 only</p> <p><input type="checkbox"/> Debtor 1 and Debtor 2 only</p> <p><input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> <b>Check if this claim relates to a community debt</b></p> <p>Date debt was incurred _____</p>	<p><b>Describe the property that secures the claim:</b></p> <div style="border: 1px dashed black; height: 40px; width: 280px;"></div> <p><b>As of the date you file, the claim is:</b> Check all that apply.</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p><b>Nature of lien.</b> Check all that apply.</p> <p><input type="checkbox"/> An agreement you made (such as mortgage or secured car loan)</p> <p><input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien)</p> <p><input type="checkbox"/> Judgment lien from a lawsuit</p> <p><input type="checkbox"/> Other (including a right to offset)</p> <p>Last 4 digits of account number ____ _</p>			
<b>Add the dollar value of your entries in Column A on this page. Write that number here:</b>		<div style="border: 1px solid black; text-align: right; padding: 2px;">\$0.00</div>			
<b>If this is the last page of your form, add the dollar value totals from all pages. Write that number here:</b>		<div style="border: 1px solid black; text-align: right; padding: 2px;">\$0.00</div>			



Debtor 1                      **Jamie**                      **Christine**                      **Denunzio**  
First Name                      Middle Name                      Last Name

Case number (if known) \_\_\_\_\_

**Part 2:** List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

☐

Name

Number      Street

City                                      State                      ZIP Code

On which line in Part 1 did you enter the creditor? \_\_\_\_\_  
Last 4 digits of account number \_\_\_\_ \_

Fill in this information to identify your case:

Debtor 1	<u>Jamie</u>	<u>Christine</u>	<u>Denunzio</u>
	First Name	Middle Name	Last Name
Debtor 2	<hr/>		
(Spouse, if filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	<u>Eastern District of Michigan</u>		
Case number	<hr/>		
(if known)			

☐ Check if this is an amended filing

## Schedule E/F: Creditors Who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on *Schedule A/B: Property* (Official Form 106A/B) and on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 106G). Do not include any creditors with partially secured claims that are listed in *Schedule D: Creditors Who Hold Claims Secured by Property*. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number (if known).

## Part 1: List All of Your PRIORITY Unsecured Claims

- ☒ No. Go to Part 2.

☐ Yes.

- 2. List all of your priority unsecured claims.** If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.

(For an explanation of each type of claim, see the instructions for this form in the instruction booklet.)

Total claim	Priority amount	Nonpriority amount
----------------	--------------------	-----------------------

<div><div></div></div>		
Priority Creditor's Name		
<hr/>		
Number	Street	
<hr/>		
City	State	ZIP Code
<b>Who incurred the debt?</b> Check one.		
<input type="checkbox"/> Debtor 1 only		
<input type="checkbox"/> Debtor 2 only		
<input type="checkbox"/> Debtor 1 and Debtor 2 only		
<input type="checkbox"/> At least one of the debtors and another		
<input type="checkbox"/> <b>Check if this claim is for a community debt</b>		
<b>Is the claim subject to offset?</b>		
<input type="checkbox"/> No		
<input type="checkbox"/> Yes		

<b>Last 4 digits of account number</b> _____	
<b>When was the debt incurred?</b> _____	
<b>As of the date you file, the claim is:</b> Check all that apply.	
<input type="checkbox"/> Contingent	
<input type="checkbox"/> Unliquidated	
<input type="checkbox"/> Disputed	
<b>Type of PRIORITY unsecured claim:</b>	
<input type="checkbox"/> Domestic support obligations	
<input type="checkbox"/> Taxes and certain other debts you owe the government	
<input type="checkbox"/> Claims for death or person injury while you were intoxicated	
<input type="checkbox"/> Other. Specify _____	

**Part 2:** List All of Your NONPRIORITY Unsecured Claims

**3. Do any creditors have nonpriority unsecured claims against you?**

- ☐ No. You have nothing to report in this part. Submit this form to the court with your other schedules.  
☒ Yes.

**4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim.** If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2.

		Total claim
4.1	<p><b>Advance America</b> Nonpriority Creditor's Name <u>1626 N Perry St</u> Number Street <u>Pontiac, MI 48340-3310</u> City State ZIP Code</p> <p><b>Who incurred the debt?</b> Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt</p> <p><b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>Last 4 digits of account number <u>5277</u></p> <p><b>When was the debt incurred?</b> _____</p> <p><b>As of the date you file, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p><b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <b>Purchase Money</b></p> <p><b>\$101.15</b></p>
4.2	<p><b>Barclays Bank Delaware</b> Nonpriority Creditor's Name <u>Po Box 8803</u> Number Street <u>Wilmington, DE 19899-8803</u> City State ZIP Code</p> <p><b>Who incurred the debt?</b> Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt</p> <p><b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>Last 4 digits of account number <u>0215</u></p> <p><b>When was the debt incurred?</b> <u>07/31/2014</u></p> <p><b>As of the date you file, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p><b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <b>Credit Card</b></p> <p><b>\$2,422.00</b></p>
4.3	<p><b>Capital One</b> Nonpriority Creditor's Name <u>26525 N Riverwoods Blvd</u> Number Street <u>Mettawa, IL 60045-3440</u> City State ZIP Code</p> <p><b>Who incurred the debt?</b> Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt</p> <p><b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>Last 4 digits of account number <u>5599</u></p> <p><b>When was the debt incurred?</b> _____</p> <p><b>As of the date you file, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p><b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <b>Credit Card</b></p> <p><b>\$259.00</b></p>

Debtor 1 Jamie Christine Denunzio  
First Name Middle Name Last Name

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**Part 2:** Your NONPRIORITY Unsecured Claims - Continuation Page

After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth.		Total claim
4.4	<p><b>Capital One Bank</b> Nonpriority Creditor's Name <b>Po Box 3004</b> Number Street <b>Phoenixville, PA 19460-0919</b> City State ZIP Code</p> <p><b>Who incurred the debt?</b> Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt</p> <p><b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>Last 4 digits of account number <u>0185</u></p> <p>When was the debt incurred? _____</p> <p><b>As of the date you file, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p><b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <b>Credit Card</b></p> <p><b>\$504.90</b></p>
4.5	<p><b>Capital One Bank USA</b> Nonpriority Creditor's Name <b>15000 Capital One Drive</b> Number Street <b>Henrico, VA 23238</b> City State ZIP Code</p> <p><b>Who incurred the debt?</b> Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt</p> <p><b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>Last 4 digits of account number <u>7805</u></p> <p>When was the debt incurred? <u>08/31/2011</u></p> <p><b>As of the date you file, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p><b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <b>Credit Card</b></p> <p><b>\$2,840.00</b></p>
4.6	<p><b>Chase Bank</b> Nonpriority Creditor's Name <b>PO Box 659732</b> Number Street <b>San Antonio, TX 78265</b> City State ZIP Code</p> <p><b>Who incurred the debt?</b> Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt</p> <p><b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>Last 4 digits of account number <u>0831</u></p> <p>When was the debt incurred? _____</p> <p><b>As of the date you file, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p><b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <b>Credit Card</b></p> <p><b>\$964.67</b></p>

Debtor 1 Jamie Christine Denunzio  
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**Part 2:** Your NONPRIORITY Unsecured Claims - Continuation Page

After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth.		Total claim
4.7	<p><b>Christian Financial</b> Nonpriority Creditor's Name <b>18441 Utica Road</b> Number Street <b>Roseville, MI 48066</b> City State ZIP Code</p> <p><b>Who incurred the debt?</b> Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt</p> <p><b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>Last 4 digits of account number <u>5920</u></p> <p>When was the debt incurred? _____</p> <p><b>As of the date you file, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p><b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <b>Credit Card</b></p> <p><b>\$25.00</b></p>
4.8	<p><b>Christian Financial</b> Nonpriority Creditor's Name <b>18441 Utica Road</b> Number Street <b>Roseville, MI 48066</b> City State ZIP Code</p> <p><b>Who incurred the debt?</b> Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt</p> <p><b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>Last 4 digits of account number <u>3952</u></p> <p>When was the debt incurred? _____</p> <p><b>As of the date you file, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p><b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <b>Credit Card</b></p> <p><b>\$25.00</b></p>
4.9	<p><b>Christian Financial Credit Union</b> Nonpriority Creditor's Name <b>35100 Van Dyke Ave</b> Number Street <b>Sterling Hts, MI 48312-3553</b> City State ZIP Code</p> <p><b>Who incurred the debt?</b> Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt</p> <p><b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>Last 4 digits of account number <u>-002</u></p> <p>When was the debt incurred? _____</p> <p><b>As of the date you file, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p><b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <b>Personal Loan</b></p> <p><b>\$906.65</b></p>

Debtor 1 Jamie Christine Denunzio  
First Name Middle Name Last Name

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**Part 2:** Your NONPRIORITY Unsecured Claims - Continuation Page

After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth.		Total claim
4.10	<p><b>Christian Financial Credit Union</b> Nonpriority Creditor's Name <u>35100 Van Dyke Ave</u> Number Street <u>Sterling Hts, MI 48312-3553</u> City State ZIP Code</p> <p><b>Who incurred the debt?</b> Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt</p> <p><b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>Last 4 digits of account number <u>-002</u></p> <p>When was the debt incurred? _____</p> <p><b>As of the date you file, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p><b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <b>Purchase Money</b></p> <p><b>\$7,721.65</b></p>
4.11	<p><b>Comcast Cable</b> Nonpriority Creditor's Name <u>PO Box 7500</u> Number Street <u>Southeastern, PA 19398</u> City State ZIP Code</p> <p><b>Who incurred the debt?</b> Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt</p> <p><b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>Last 4 digits of account number <u>0303</u></p> <p>When was the debt incurred? _____</p> <p><b>As of the date you file, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p><b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <b>Notice Only</b></p> <p><b>\$391.50</b></p>
4.12	<p><b>Comenity Bank/Victorias Secret</b> Nonpriority Creditor's Name <u>Po Box 182782</u> Number Street <u>Columbus, OH 43218-2782</u> City State ZIP Code</p> <p><b>Who incurred the debt?</b> Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt</p> <p><b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>Last 4 digits of account number <u>7943</u></p> <p>When was the debt incurred? _____</p> <p><b>As of the date you file, the claim is:</b> Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p><b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <b>Credit Card</b></p> <p><b>\$408.00</b></p>

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**Part 2:** Your NONPRIORITY Unsecured Claims - Continuation Page

After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth.		Total claim
4.13	<p><b>Crown Asset Management, LLC</b> Nonpriority Creditor's Name <b>3100 Breckinridge Blvd Ste 725</b> Number Street <b>Duluth, GA 30096-7605</b> City State ZIP Code</p> <p><b>Who incurred the debt?</b> Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt</p> <p><b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>Last 4 digits of account number <u>4410</u></p> <p>When was the debt incurred? _____</p> <p>As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p><b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <b>Credit Card</b></p> <p><b>\$869.60</b></p>
4.14	<p><b>Financial Recovery Services, Inc</b> Nonpriority Creditor's Name <b>PO Box 385908</b> Number Street <b>Minneapolis, MN 55438</b> City State ZIP Code</p> <p><b>Who incurred the debt?</b> Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt</p> <p><b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>Last 4 digits of account number <u>0961</u></p> <p>When was the debt incurred? _____</p> <p>As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p><b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <b>Credit Card</b></p> <p><b>\$2,422.36</b></p>
4.15	<p><b>Fingerhut</b> Nonpriority Creditor's Name <b>PO Box 166</b> Number Street <b>Newark, NJ 07101</b> City State ZIP Code</p> <p><b>Who incurred the debt?</b> Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt</p> <p><b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>Last 4 digits of account number <u>3017</u></p> <p>When was the debt incurred? _____</p> <p>As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p><b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <b>Credit Card</b></p> <p><b>\$740.98</b></p>

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**Part 2:** Your NONPRIORITY Unsecured Claims - Continuation Page

After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth.		Total claim
4.16	<p><b>Galaxy International Purchasing, LLC</b> Nonpriority Creditor's Name <b>4730 S Fort Apache Rd Ste 300</b> Number Street <b>Las Vegas, NV 89147-7947</b> City State ZIP Code</p> <p><b>Who incurred the debt?</b> Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt</p> <p><b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>Last 4 digits of account number <u>9103</u></p> <p>When was the debt incurred? _____</p> <p><b>As of the date you file, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p><b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <b>Credit Card</b></p> <p><b>\$3,665.32</b></p>
4.17	<p><b>Genpact Services LLC</b> Nonpriority Creditor's Name <b>PO Box 1969</b> Number Street <b>Southgate, MI 48195-0969</b> City State ZIP Code</p> <p><b>Who incurred the debt?</b> Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt</p> <p><b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>Last 4 digits of account number <u>0959</u></p> <p>When was the debt incurred? _____</p> <p><b>As of the date you file, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p><b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <b>Credit Card</b></p> <p><b>\$407.00</b></p>
4.18	<p><b>KOHL'S DEPARTMENT STORE</b> Nonpriority Creditor's Name <b>Po Box 3043</b> Number Street <b>Milwaukee, WI 53201-3043</b> City State ZIP Code</p> <p><b>Who incurred the debt?</b> Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt</p> <p><b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>Last 4 digits of account number <u>-603</u></p> <p>When was the debt incurred? <u>2019</u></p> <p><b>As of the date you file, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p><b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <b>Credit Card</b></p> <p><b>\$194.44</b></p>



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**Part 2:** Your NONPRIORITY Unsecured Claims - Continuation Page

After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth.		Total claim
4.19	<p><b>Merrick Bank</b> Nonpriority Creditor's Name <b>Po Box 30537</b> Number Street <b>Tampa, FL 33630-3537</b> City State ZIP Code</p> <p><b>Who incurred the debt?</b> Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt</p> <p><b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>Last 4 digits of account number _____</p> <p>When was the debt incurred? _____</p> <p><b>As of the date you file, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p><b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <b>Credit Card</b></p> <p><b>\$680.01</b></p>
4.20	<p><b>Midland Funding LLC</b> Nonpriority Creditor's Name <b>Po Box 1628</b> Number Street <b>Warren, MI 48090-1628</b> City State ZIP Code</p> <p><b>Who incurred the debt?</b> Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt</p> <p><b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>Last 4 digits of account number <u>6679</u></p> <p>When was the debt incurred? _____</p> <p><b>As of the date you file, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p><b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <b>Credit Card</b></p> <p><b>\$916.65</b></p>
4.21	<p><b>Portfolio Recovery Associates, LLC</b> Nonpriority Creditor's Name <b>3250 W Big Beaver Rd Ste 124</b> Number Street <b>Troy, MI 48084-2902</b> City State ZIP Code</p> <p><b>Who incurred the debt?</b> Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt</p> <p><b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>Last 4 digits of account number <u>#199</u></p> <p>When was the debt incurred? _____</p> <p><b>As of the date you file, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p><b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <b>Credit Card</b></p> <p><b>\$6,492.00</b></p>

Debtor 1 Jamie Christine Denunzio  
First Name Middle Name Last Name

Case number (if known) \_\_\_\_\_

**Part 2:** Your NONPRIORITY Unsecured Claims - Continuation Page

After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth.		Total claim
4.22	<p><b>Portfolio Recovery Associates, LLC</b> Nonpriority Creditor's Name <u>c/o Weber &amp; Olcese. P.L.C.</u> <u>3250 W Big Beaver Rd Ste 124</u> Number Street <u>Troy, MI 48084-2902</u> City State ZIP Code</p> <p><b>Who incurred the debt?</b> Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt</p> <p><b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>Last 4 digits of account number <u>#119</u></p> <p>When was the debt incurred? _____</p> <p><b>As of the date you file, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p><b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <b>Credit Card</b></p> <p><b>\$710.89</b></p>
4.23	<p><b>Portfolio Recovery Associates, LLC</b> Nonpriority Creditor's Name <u>c/o Weber &amp; Olcese. P.L.C.</u> <u>3250 W Big Beaver Rd Ste 124</u> Number Street <u>Troy, MI 48084-2902</u> City State ZIP Code</p> <p><b>Who incurred the debt?</b> Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt</p> <p><b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>Last 4 digits of account number <u>199</u></p> <p>When was the debt incurred? _____</p> <p><b>As of the date you file, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p><b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <b>Credit Card</b></p> <p><b>\$1,311.00</b></p>
4.24	<p><b>QVC</b> Nonpriority Creditor's Name <u>PO Box 530905</u> Number Street <u>Atlanta, GA 30353</u> City State ZIP Code</p> <p><b>Who incurred the debt?</b> Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt</p> <p><b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>Last 4 digits of account number <u>9683</u></p> <p>When was the debt incurred? _____</p> <p><b>As of the date you file, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p><b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <b>Credit Card</b></p> <p><b>\$373.68</b></p>

Debtor 1      Jamie      Christine      Denunzio  
First Name      Middle Name      Last Name

Case number (if known) \_\_\_\_\_

**Part 2:** Your NONPRIORITY Unsecured Claims - Continuation Page

After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth.		Total claim
4.25	<p><b>Target Card Services</b> Nonpriority Creditor's Name <b>PO Box 660170</b> Number      Street <b>Dallas, TX 75266</b> City      State      ZIP Code</p> <p><b>Who incurred the debt?</b> Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt</p> <p><b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p><b>Last 4 digits of account number</b> <u>4548</u>      <b>\$575.69</b></p> <p><b>When was the debt incurred?</b> _____</p> <p><b>As of the date you file, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p><b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <b>Credit Card</b></p>
4.26	<p><b>U.S. Department of Education</b> Nonpriority Creditor's Name <b>National Payment Center</b> <b>Po Box 790336</b> Number      Street <b>Saint Louis, MO 63179-0336</b> City      State      ZIP Code</p> <p><b>Who incurred the debt?</b> Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt</p> <p><b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p><b>Last 4 digits of account number</b> <u>9614</u>      <b>\$15,037.00</b></p> <p><b>When was the debt incurred?</b> _____</p> <p><b>As of the date you file, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p><b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <b>Student Loan</b></p>

Debtor 1      Jamie      Christine      Denunzio  
First Name      Middle Name      Last Name

Case number (if known) \_\_\_\_\_

**Part 3:** List Others to Be Notified About a Debt That You Already Listed

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

David J. Canine

Name

30150 Telegraph Rd Ste 444

Number      Street

Bingham Farms, MI 48025-4549

City      State      ZIP Code

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.16 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number 9103

Bankcard Services

Name

Po Box 84049

Number      Street

Columbus, GA 31908-4049

City      State      ZIP Code

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.16 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number 4462

Northland Group, Inc.

Name

PO Box 309846 Mail Code GLXD86

Number      Street

Minneapolis, MN 55439

City      State      ZIP Code

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.16 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number 7543

D & A Services

Name

1400 E Touhy Ave Ste G2

Number      Street

Des Plaines, IL 60018-3338

City      State      ZIP Code

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.13 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number 4661

Great American Finance Co.

Name

20 N Wacker Dr Ste 2275

Number      Street

Chicago, IL 60606-3096

City      State      ZIP Code

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.13 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number \_\_\_\_\_

Phillips & Cohen Associates, Ltd

Name

Mail Stop: 147 1002 Justison Street

Number      Street

Wilmington, DE 19801-5147

City      State      ZIP Code

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.19 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number 7667

Carson Smithfield, LLC

Name

PO Box 9216

Number      Street

Old Bethpage, NY 11804

City      State      ZIP Code

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.19 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number 1715

Debtor 1      Jamie      Christine      Denunzio      Case number (if known) \_\_\_\_\_  
First Name      Middle Name      Last Name

**Part 3:** List Others to Be Notified About a Debt That You Already Listed Additional Page

<b>N.A.R., Inc.</b> Name <b>1600 W 2200 S Ste 410</b> Number Street <b>W Valley City, UT 84119-7240</b> City State ZIP Code	<b>On which entry in Part 1 or Part 2 did you list the original creditor?</b> Line <u>4.19</u> of (Check one): <input type="checkbox"/> Part 1: Creditors with Priority Unsecured Claims <input checked="" type="checkbox"/> Part 2: Creditors with Nonpriority Unsecured Claims <b>Last 4 digits of account number 0832</b>
<b>Alliance One Receivables Management</b> Name <b>4850 E Street Rd Suite 300</b> Number Street <b>Trevoese, PA 19053-6600</b> City State ZIP Code	<b>On which entry in Part 1 or Part 2 did you list the original creditor?</b> Line <u>4.4</u> of (Check one): <input type="checkbox"/> Part 1: Creditors with Priority Unsecured Claims <input checked="" type="checkbox"/> Part 2: Creditors with Nonpriority Unsecured Claims <b>Last 4 digits of account number 0499</b>
<b>PORTFOLIO RECOVERY ASSOC</b> Name <b>PO Box 12914</b> Number Street <b>Norfolk, VA 23541</b> City State ZIP Code	<b>On which entry in Part 1 or Part 2 did you list the original creditor?</b> Line <u>4.4</u> of (Check one): <input type="checkbox"/> Part 1: Creditors with Priority Unsecured Claims <input checked="" type="checkbox"/> Part 2: Creditors with Nonpriority Unsecured Claims <b>Last 4 digits of account number 0185</b>
<b>Home Depot Credit Services</b> Name <b>PO Box 790328</b> Number Street <b>Saint Louis, MO 63179</b> City State ZIP Code	<b>On which entry in Part 1 or Part 2 did you list the original creditor?</b> Line <u>4.22</u> of (Check one): <input type="checkbox"/> Part 1: Creditors with Priority Unsecured Claims <input checked="" type="checkbox"/> Part 2: Creditors with Nonpriority Unsecured Claims <b>Last 4 digits of account number 1462</b>
<b>Weber &amp; Olcese, P.L.C.</b> Name <b>3250 W. Big Beaver Road Suite 124</b> Number Street <b>Troy, MI 48084</b> City State ZIP Code	<b>On which entry in Part 1 or Part 2 did you list the original creditor?</b> Line <u>4.22</u> of (Check one): <input type="checkbox"/> Part 1: Creditors with Priority Unsecured Claims <input checked="" type="checkbox"/> Part 2: Creditors with Nonpriority Unsecured Claims <b>Last 4 digits of account number #199</b>
<b>United Recovery Systems</b> Name <b>5800 N Course Dr</b> Number Street <b>Houston, TX 77072-1613</b> City State ZIP Code	<b>On which entry in Part 1 or Part 2 did you list the original creditor?</b> Line <u>4.22</u> of (Check one): <input type="checkbox"/> Part 1: Creditors with Priority Unsecured Claims <input checked="" type="checkbox"/> Part 2: Creditors with Nonpriority Unsecured Claims <b>Last 4 digits of account number 1462</b>
<b>Weber &amp; Olcese, P.L.C.</b> Name <b>3250 W. Big Beaver Road Suite 124</b> Number Street <b>Troy, MI 48084</b> City State ZIP Code	<b>On which entry in Part 1 or Part 2 did you list the original creditor?</b> Line <u>4.23</u> of (Check one): <input type="checkbox"/> Part 1: Creditors with Priority Unsecured Claims <input checked="" type="checkbox"/> Part 2: Creditors with Nonpriority Unsecured Claims <b>Last 4 digits of account number 199</b>

**Part 3:** List Others to Be Notified About a Debt That You Already Listed Additional Page

<b>Elizabeth Smith,</b> Name <b>Po Box 2044</b> Number Street <b>Warren, MI 48090-2044</b> City State ZIP Code	<b>On which entry in Part 1 or Part 2 did you list the original creditor?</b> Line <u>4.20</u> of (Check one): <input type="checkbox"/> Part 1: Creditors with Priority Unsecured Claims <input checked="" type="checkbox"/> Part 2: Creditors with Nonpriority Unsecured Claims <b>Last 4 digits of account number</b> <u>3868</u>
<b>Walmart/Synchrony Bank</b> Name <b>Po Box 530927</b> Number Street <b>Atlanta, GA 30353-0927</b> City State ZIP Code	<b>On which entry in Part 1 or Part 2 did you list the original creditor?</b> Line <u>4.20</u> of (Check one): <input type="checkbox"/> Part 1: Creditors with Priority Unsecured Claims <input checked="" type="checkbox"/> Part 2: Creditors with Nonpriority Unsecured Claims <b>Last 4 digits of account number</b> <u>3868</u>
<b>Northstar Locations Services, LLC</b> Name <b>Attn: Financial Services Dept</b> <b>4285 Genesee St</b> Number Street <b>Cheektowaga, NY 14225-1943</b> City State ZIP Code	<b>On which entry in Part 1 or Part 2 did you list the original creditor?</b> Line <u>4.14</u> of (Check one): <input type="checkbox"/> Part 1: Creditors with Priority Unsecured Claims <input checked="" type="checkbox"/> Part 2: Creditors with Nonpriority Unsecured Claims <b>Last 4 digits of account number</b> <u>4620</u>
<b>Barclay Card Services</b> Name <b>P.O. Box 8803</b> Number Street <b>Wilmington, DE 19899</b> City State ZIP Code	<b>On which entry in Part 1 or Part 2 did you list the original creditor?</b> Line <u>4.14</u> of (Check one): <input type="checkbox"/> Part 1: Creditors with Priority Unsecured Claims <input checked="" type="checkbox"/> Part 2: Creditors with Nonpriority Unsecured Claims <b>Last 4 digits of account number</b> <u>0961</u>
<b>Lowe's/Synchrony Bank</b> Name <b>PO Box 965005</b> Number Street <b>Orlando, FL 32896</b> City State ZIP Code	<b>On which entry in Part 1 or Part 2 did you list the original creditor?</b> Line <u>4.17</u> of (Check one): <input type="checkbox"/> Part 1: Creditors with Priority Unsecured Claims <input checked="" type="checkbox"/> Part 2: Creditors with Nonpriority Unsecured Claims <b>Last 4 digits of account number</b> <u>5443</u>
<b>AFNI, Inc.</b> Name <b>PO Box 3517</b> Number Street <b>Bloomington, IL 61702</b> City State ZIP Code	<b>On which entry in Part 1 or Part 2 did you list the original creditor?</b> Line <u>4.11</u> of (Check one): <input type="checkbox"/> Part 1: Creditors with Priority Unsecured Claims <input checked="" type="checkbox"/> Part 2: Creditors with Nonpriority Unsecured Claims <b>Last 4 digits of account number</b> <u>9-01</u>
<b>Convergent Outsourcing</b> Name <b>800 SW 39th St.</b> <b>PO Box 9004</b> Number Street <b>Renton, WA 98057</b> City State ZIP Code	<b>On which entry in Part 1 or Part 2 did you list the original creditor?</b> Line <u>4.11</u> of (Check one): <input type="checkbox"/> Part 1: Creditors with Priority Unsecured Claims <input checked="" type="checkbox"/> Part 2: Creditors with Nonpriority Unsecured Claims <b>Last 4 digits of account number</b> <u>1960</u>

**Part 3:** List Others to Be Notified About a Debt That You Already Listed Additional Page

<b>Nationwide Credit, Inc.</b> Name <b>Po Box 26314</b> Number Street <b>Lehigh Valley, PA 18002-6314</b> City State ZIP Code	<b>On which entry in Part 1 or Part 2 did you list the original creditor?</b> Line <u>4.24</u> of (Check one): <input type="checkbox"/> Part 1: Creditors with Priority Unsecured Claims <input checked="" type="checkbox"/> Part 2: Creditors with Nonpriority Unsecured Claims <b>Last 4 digits of account number</b> <u>3042</u>
<b>PennCredit Corporation</b> Name <b>2800 Commerce Drive</b> Number Street <b>Harrisburg, PA 17110</b> City State ZIP Code	<b>On which entry in Part 1 or Part 2 did you list the original creditor?</b> Line <u>4.24</u> of (Check one): <input type="checkbox"/> Part 1: Creditors with Priority Unsecured Claims <input checked="" type="checkbox"/> Part 2: Creditors with Nonpriority Unsecured Claims <b>Last 4 digits of account number</b> <u>1610</u>
<b>ERC</b> Name <b>Po Box 23870</b> Number Street <b>Jacksonville, FL 32241-3870</b> City State ZIP Code	<b>On which entry in Part 1 or Part 2 did you list the original creditor?</b> Line <u>4.25</u> of (Check one): <input type="checkbox"/> Part 1: Creditors with Priority Unsecured Claims <input checked="" type="checkbox"/> Part 2: Creditors with Nonpriority Unsecured Claims <b>Last 4 digits of account number</b> <u>4831</u>
<b>Dinning &amp; Greve, PLLC</b> Name <b>18441 Utica Rd Ste A</b> Number Street <b>Roseville, MI 48066-4202</b> City State ZIP Code	<b>On which entry in Part 1 or Part 2 did you list the original creditor?</b> Line <u>4.9</u> of (Check one): <input type="checkbox"/> Part 1: Creditors with Priority Unsecured Claims <input checked="" type="checkbox"/> Part 2: Creditors with Nonpriority Unsecured Claims <b>Last 4 digits of account number</b> _____
<b>C.U. Recovery</b> Name <b>26263 Forest Blvd</b> Number Street <b>Wyoming, MN 55092-8033</b> City State ZIP Code	<b>On which entry in Part 1 or Part 2 did you list the original creditor?</b> Line <u>4.9</u> of (Check one): <input type="checkbox"/> Part 1: Creditors with Priority Unsecured Claims <input checked="" type="checkbox"/> Part 2: Creditors with Nonpriority Unsecured Claims <b>Last 4 digits of account number</b> <u>2001</u>
<b>Midland Funding, LLC</b> Name <b>Elizabeth Smith, Andrew Perry, Stephanie Pettway, Omar Najor</b> <b>PO Box 2044</b> Number Street <b>Warren, MI 48090-2044</b> City State ZIP Code	<b>On which entry in Part 1 or Part 2 did you list the original creditor?</b> Line <u>4.9</u> of (Check one): <input type="checkbox"/> Part 1: Creditors with Priority Unsecured Claims <input checked="" type="checkbox"/> Part 2: Creditors with Nonpriority Unsecured Claims <b>Last 4 digits of account number</b> _____
<b>Great Lakes Borrower Services</b> Name <b>Po Box 7860</b> Number Street <b>Madison, WI 53707-7860</b> City State ZIP Code	<b>On which entry in Part 1 or Part 2 did you list the original creditor?</b> Line <u>4.26</u> of (Check one): <input type="checkbox"/> Part 1: Creditors with Priority Unsecured Claims <input checked="" type="checkbox"/> Part 2: Creditors with Nonpriority Unsecured Claims <b>Last 4 digits of account number</b> <u>0504</u>

Debtor 1      Jamie      Christine      Denunzio  
First Name      Middle Name      Last Name

Case number (if known) \_\_\_\_\_

**Part 3:** List Others to Be Notified About a Debt That You Already Listed Additional Page

**Pioneer**

Name

**26 Edward St**

Number      Street

**Arcade, NY 14009-1012**

City      State      ZIP Code

**On which entry in Part 1 or Part 2 did you list the original creditor?**

Line 4.26 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

**Last 4 digits of account number** \_\_\_\_\_

**Dinning & Greve, PLLC**

Name

**18441 Utica Rd Ste A**

Number      Street

**Roseville, MI 48066-4202**

City      State      ZIP Code

**On which entry in Part 1 or Part 2 did you list the original creditor?**

Line 4.10 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

**Last 4 digits of account number** \_\_\_\_\_

**Midland Funding, LLC**

Name

**Elizabeth Smith, Andrew Perry, Stephanie Pettway,  
Omar Najor**

**PO Box 2044**

Number      Street

**Warren, MI 48090-2044**

City      State      ZIP Code

**On which entry in Part 1 or Part 2 did you list the original creditor?**

Line 4.10 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

**Last 4 digits of account number** \_\_\_\_\_



Debtor 1      Jamie      Christine      Denunzio  
First Name      Middle Name      Last Name

Case number (if known) \_\_\_\_\_

**Part 4:** Add the Amounts for Each Type of Unsecured Claim

**6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.**

		Total claim
Total claims from Part 1	6a. Domestic support obligations	6a. <u>\$0.00</u>
	6b. Taxes and certain other debts you owe the government	6b. <u>\$0.00</u>
	6c. Claims for death or personal injury while you were intoxicated	6c. <u>\$0.00</u>
	6d. Other. Add all other priority unsecured claims. Write that amount here.	6d. + <u>\$0.00</u>
	6e. Total. Add lines 6a through 6d.	6e. <u>\$0.00</u>

		Total claim
Total claims from Part 2	6f. Student loans	6f. <u>\$0.00</u>
	6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g. <u>\$0.00</u>
	6h. Debts to pension or profit-sharing plans, and other similar debts	6h. <u>\$0.00</u>
	6i. Other. Add all other nonpriority unsecured claims. Write that amount here.	6i. + <u>\$50,966.14</u>
	6j. Total. Add lines 6f through 6i.	6j. <u>\$50,966.14</u>

Fill in this information to identify your case:

Debtor 1	<u>Jamie</u>	<u>Christine</u>	<u>Denunzio</u>
	First Name	Middle Name	Last Name
Debtor 2			
(Spouse, if filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	<u>Eastern District of Michigan</u>		
Case number			
(if known)			

☐ Check if this is an amended filing

## Official Form 106G

### Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

1. Do you have any executory contracts or unexpired leases?

- ☐ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
- ☒ Yes. Fill in all of the information below even if the contracts or leases are listed on *Schedule A/B: Property* (Official Form 106A/B).

2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease	State what the contract or lease is for
2.1 <u>Orion Lakes Mobile Home Park</u> Name <u>47 Bluebird Hill Dr</u> Number Street <u>Orion, MI 48359-1807</u> City State ZIP Code	Lot rent for mobile home Contract to be ASSUMED
2.2 <u></u> Name <u></u> Number Street <u></u> City State ZIP Code	
2.3 <u></u> Name <u></u> Number Street <u></u> City State ZIP Code	
2.4 <u></u> Name <u></u> Number Street <u></u> City State ZIP Code	

Fill in this information to identify your case:

Debtor 1	<u>Jamie</u>	<u>Christine</u>	<u>Denunzio</u>
	First Name	Middle Name	Last Name
Debtor 2			
(Spouse, if filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	<u>Eastern District of Michigan</u>		
Case number			
(if known)			

☐ Check if this is an amended filing

## Official Form 106H

### Schedule H: Your Codebtors

12/15

**Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question.**

1. **Do you have any codebtors?** (If you are filing a joint case, do not list either spouse as a codebtor.)

☐ No

☒ Yes

2. **Within the last 8 years, have you lived in a community property state or territory?** (*Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.*)

☒ No. Go to line 3.

☐ Yes. Did your spouse, former spouse, or legal equivalent live with you at the time?

☐ No

☐ Yes. In which community state or territory did you live? \_\_\_\_\_ Fill in the name and current address of that person.

\_\_\_\_\_  
Name

\_\_\_\_\_  
Number Street

\_\_\_\_\_  
City State ZIP Code

3. **In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filing with you. List the person shown in line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on *Schedule D* (Official Form 106D), *Schedule E/F* (Official Form 106E/F), or *Schedule G* (Official Form 106G). Use *Schedule D*, *Schedule E/F*, or *Schedule G* to fill out Column 2.**

Column 1: Your codebtor

Column 2: The creditor to whom you owe the debt

Check all schedules that apply:

3.1

Denunzio Jr, Joseph James

Name

46 Bluebird Hill Dr

Number Street

Orion, MI 48359-1807

City State ZIP Code

☐ Schedule D, line \_\_\_\_\_

☐ Schedule E/F, line \_\_\_\_\_

☒ Schedule G, line 2.1

Fill in this information to identify your case:

Debtor 1	<u>Jamie</u>	<u>Christine</u>	<u>Denunzio</u>
	First Name	Middle Name	Last Name
<hr/>			
Debtor 2	<hr/>		
(Spouse, if filing)	First Name	Middle Name	Last Name
<hr/>			
United States Bankruptcy Court for the:	<u>Eastern District of Michigan</u>		
<hr/>			
Case number	<hr/>		
(if known)			

Check if this is:

☐ An amended filing

☐ A supplement showing postpetition chapter 13 income as of the following date:

---

MM / DD / YYYY

## Official Form 106I

### Schedule I: Your Income

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

#### Part 1: Describe Employment

1. Fill in your employment information.

If you have more than one job, attach a separate page with information about additional employers.

Include part time, seasonal, or self-employed work.

Occupation may include student or homemaker, if it applies.

Employment status

Occupation

Employer's name

Employer's address

Debtor 1

☐ Employed ☒ Not Employed

---

---

---

Number Street

---

---

City State Zip Code

How long employed there? 

---

Debtor 2 or non-filing spouse

☒ Employed ☐ Not Employed

---

---

---

725 S Adams Rd Ste 160

---

---

Birmingham, MI 48009-6959

---

#### Part 2: Give Details About Monthly Income

**Estimate monthly income as of the date you file this form.** If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

2. **List monthly gross wages, salary, and commissions** (before all payroll deductions.) If not paid monthly, calculate what the monthly wage would be.

3. **Estimate and list monthly overtime pay.**

4. **Calculate gross income.** Add line 2 + line 3.

For Debtor 1

For Debtor 2 or non-filing spouse

2. \$183.47 \$0.00

3. + \$0.00 + \$0.00

4. \$183.47 \$0.00

		For Debtor 1	For Debtor 2 or non-filing spouse
Copy line 4 here.....→	4.	\$183.47	\$0.00
5. List all payroll deductions:			
5a. Tax, Medicare, and Social Security deductions	5a.	\$0.00	\$0.00
5b. Mandatory contributions for retirement plans	5b.	\$0.00	\$0.00
5c. Voluntary contributions for retirement plans	5c.	\$0.00	\$0.00
5d. Required repayments of retirement fund loans	5d.	\$0.00	\$0.00
5e. Insurance	5e.	\$0.00	\$0.00
5f. Domestic support obligations	5f.	\$0.00	\$0.00
5g. Union dues	5g.	\$0.00	\$0.00
5h. Other deductions. Specify: _____	5h. +	\$0.00	\$0.00
6. Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e + 5f + 5g + 5h.	6.	\$0.00	\$0.00
7. Calculate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$183.47	\$0.00
8. List all other income regularly received:			
8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	\$0.00	\$0.00
8b. Interest and dividends	8b.	\$0.00	\$0.00
8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$604.14	\$0.00
8d. Unemployment compensation	8d.	\$0.00	\$0.00
8e. Social Security	8e.	\$0.00	\$0.00
8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: <u>EBT Card</u>	8f.	\$306.00	\$0.00
8g. Pension or retirement income	8g.	\$0.00	\$0.00
8h. Other monthly income. Specify: <u>Income from All Other Sources/Unemployment</u>	8h. +	\$0.00	\$1,556.60
9. Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f + 8g + 8h.	9.	\$910.14	\$1,556.60
10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse	10.	\$1,093.61	\$1,556.60
11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: _____	11. +		\$0.00
12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Your Assets and Liabilities and Certain Statistical Information, if it applies	12.		\$2,650.21
13. Do you expect an increase or decrease within the year after you file this form? <input checked="" type="checkbox"/> No. <input type="checkbox"/> Yes. Explain: _____			

Combined monthly income

Jamie	Christine	Denunzio
First Name	Middle Name	Last Name

Case number (if known) \_\_\_\_\_

### 1. Employment information for Debtor 1

<b>Occupation</b>	<u>Sales/Independent Contractor</u>
-------------------	-------------------------------------

**Employer's name** Jamie Denunzio

**Employer's address** 46 Bluebird Hill Dr  
Number Street

Lake Orion, MI 48359		
City	State	Zip Code

How long employed there? 3 years

Fill in this information to identify your case:

Debtor 1	<u>Jamie</u>	<u>Christine</u>	<u>Denunzio</u>
	First Name	Middle Name	Last Name
Debtor 2	_____		
(Spouse, if filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	<u>Eastern District of Michigan</u>		
Case number	_____		
(if known)			

Check if this is:

☐ An amended filing

☐ A supplement showing postpetition chapter 13 income as of the following date:

\_\_\_\_\_  
MM / DD / YYYY

## Official Form 106J

### Schedule J: Your Expenses

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

#### Part 1: Describe Your Household

1. Is this a joint case?

☒ No. Go to line 2.

☐ Yes. Does Debtor 2 live in a separate household?

☐ No

☐ Yes. Debtor 2 must file Official Form 106J-2, *Expenses for Separate Household of Debtor 2*.

2. Do you have dependents?

Do not list Debtor 1 and Debtor 2.

Do not state the dependents' names.

☐ No

☒ Yes. Fill out this information for each dependent.....

**Dependent's relationship to Debtor 1 or Debtor 2**

**Dependent's age**

**Does dependent live with you?**

Child

10

☐ No. ☒ Yes.

Child

9

☐ No. ☒ Yes.

Child

4

☐ No. ☒ Yes.

☐ No. ☐ Yes.

☐ No. ☐ Yes.

3. Do your expenses include expenses of people other than yourself and your dependents?

☒ No

☐ Yes

#### Part 2: Estimate Your Ongoing Monthly Expenses

Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental *Schedule J*, check the box at the top of the form and fill in the applicable date.

Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on *Schedule I: Your Income* (Official Form 106I.)

Your expenses

4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot.

4. \_\_\_\_\_ \$525.00

If not included in line 4:

4a. Real estate taxes

4a. \_\_\_\_\_ \$0.00

4b. Property, homeowner's, or renter's insurance

4b. \_\_\_\_\_ \$0.00

4c. Home maintenance, repair, and upkeep expenses

4c. \_\_\_\_\_ \$100.00

4d. Homeowner's association or condominium dues

4d. \_\_\_\_\_ \$0.00

		Your expenses	
5.	<b>Additional mortgage payments for your residence</b> , such as home equity loans	5.	_____
6.	<b>Utilities:</b>		
6a.	Electricity, heat, natural gas	6a.	\$450.00
6b.	Water, sewer, garbage collection	6b.	\$70.00
6c.	Telephone, cell phone, Internet, satellite, and cable services	6c.	\$105.00
6d.	Other. Specify: _____	6d.	\$0.00
7.	<b>Food and housekeeping supplies</b>	7.	\$400.00
8.	<b>Childcare and children's education costs</b>	8.	\$0.00
9.	<b>Clothing, laundry, and dry cleaning</b>	9.	\$100.00
10.	<b>Personal care products and services</b>	10.	\$100.00
11.	<b>Medical and dental expenses</b>	11.	\$0.00
12.	<b>Transportation.</b> Include gas, maintenance, bus or train fare. Do not include car payments.	12.	\$425.00
13.	<b>Entertainment, clubs, recreation, newspapers, magazines, and books</b>	13.	\$50.00
14.	<b>Charitable contributions and religious donations</b>	14.	\$0.00
15.	<b>Insurance.</b> Do not include insurance deducted from your pay or included in lines 4 or 20.		
15a.	Life insurance	15a.	\$0.00
15b.	Health insurance	15b.	\$0.00
15c.	Vehicle insurance	15c.	\$300.00
15d.	Other insurance. Specify: _____	15d.	\$0.00
16.	<b>Taxes.</b> Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: _____	16.	\$0.00
17.	<b>Installment or lease payments:</b>		
17a.	Car payments for Vehicle 1	17a.	\$260.72
17b.	Car payments for Vehicle 2	17b.	_____
17c.	Other. Specify: _____	17c.	_____
17d.	Other. Specify: _____	17d.	_____
18.	<b>Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).</b>	18.	\$247.00
19.	<b>Other payments you make to support others who do not live with you.</b> Specify: _____	19.	\$0.00
20.	<b>Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.</b>		
20a.	Mortgages on other property	20a.	\$0.00
20b.	Real estate taxes	20b.	\$0.00
20c.	Property, homeowner's, or renter's insurance	20c.	\$0.00
20d.	Maintenance, repair, and upkeep expenses	20d.	\$0.00
20e.	Homeowner's association or condominium dues	20e.	\$0.00



Debtor 1      Jamie      Christine      Denunzio  
First Name      Middle Name      Last Name

Case number (if known) \_\_\_\_\_

21. **Other.** Specify: \_\_\_\_\_

21.      +      \$0.00

22. **Calculate your monthly expenses.**

22a. Add lines 4 through 21.

22a.      \$3,132.72

22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2

22b.      \$0.00

22c. Add line 22a and 22b. The result is your monthly expenses.

22c.      \$3,132.72

23. **Calculate your monthly net income.**

23a. Copy line 12 (your combined monthly income) from *Schedule I*.

23a.      \$2,650.21

23b. Copy your monthly expenses from line 22c above.

23b.      -      \$3,132.72

23c. Subtract your monthly expenses from your monthly income.

The result is your *monthly net income*.

23c.      (\$482.51)

24. **Do you expect an increase or decrease in your expenses within the year after you file this form?**

For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?

☐ No.

☒ Yes.

Explain here:

Payments for replacing work vehicle for husband. Debtor is expecting a special needs child in March 2020. Debtor uses her tax refund to balance budget.

Fill in this information to identify your case:

Debtor 1	<u>Jamie</u>	<u>Christine</u>	<u>Denunzio</u>
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	_____	_____	_____
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	<u>Eastern District of Michigan</u>		
Case number (if known)	_____		

☐ Check if this is an amended filing

## Official Form 106Sum

# Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new **Summary** and check the box at the top of this page.

### Part 1: Summarize Your Assets

#### Your assets

Value of what you own

#### 1. **Schedule A/B: Property** (Official Form 106A/B)

1a. Copy line 55, Total real estate, from <i>Schedule A/B</i> .....	<u>\$250.00</u>
1b. Copy line 62, Total personal property, from <i>Schedule A/B</i> .....	<u>\$5,678.99</u>
1c. Copy line 63, Total of all property on <i>Schedule A/B</i> .....	<u>\$5,928.99</u>

### Part 2: Summarize Your Liabilities

#### Your liabilities

Amount you owe

#### 2. **Schedule D: Creditors Who Have Claims Secured by Property** (Official Form 106D)

2a. Copy the total you listed in Column A, <i>Amount of claim</i> , at the bottom of the last page of Part 1 of <i>Schedule D</i> .....	<u>\$0.00</u>
---	---------------

#### 3. **Schedule E/F: Creditors Who Have Unsecured Claims** (Official Form 106E/F)

3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of <i>Schedule E/F</i> .....	<u>\$0.00</u>
3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of <i>Schedule E/F</i> .....	<u>\$50,966.14</u>

**Your total liabilities**

**+** \$50,966.14

### Part 3: Summarize Your Income and Expenses

#### 4. **Schedule I: Your Income** (Official Form 106I)

Copy your combined monthly income from line 12 of <i>Schedule I</i> .....	<u>\$2,650.21</u>
---	-------------------

#### 5. **Schedule J: Your Expenses** (Official Form 106J)

Copy your monthly expenses from line 22c of <i>Schedule J</i> .....	<u>\$3,132.72</u>
---	-------------------

Debtor 1      Jamie      Christine      Denunzio  
First Name      Middle Name      Last Name

Case number (if known) \_\_\_\_\_

**Part 4:** Answer These Questions for Administrative and Statistical Records

**6. Are you filing for bankruptcy under Chapters 7, 11, or 13?**

- ☐ No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.
- ☒ Yes

**7. What kind of debt do you have?**

- ☒ **Your debts are primarily consumer debts.** Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
- ☐ **Your debts are not primarily consumer debts.** You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

**8. From the Statement of Your Current Monthly Income:** Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

\$4,559.17

**9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:**

**Total claim**

**From Part 4 on Schedule E/F, copy the following:**

9a. Domestic support obligations (Copy line 6a.)	<u>\$0.00</u>
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	<u>\$0.00</u>
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	<u>\$0.00</u>
9d. Student loans. (Copy line 6f.)	<u>\$0.00</u>
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	<u>\$0.00</u>
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	<b>+</b> <u>\$0.00</u>
9g. <b>Total.</b> Add lines 9a through 9f.	<u>\$0.00</u>

Fill in this information to identify your case:

Debtor 1	<u>Jamie</u>	<u>Christine</u>	<u>Denunzio</u>
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	_____	_____	_____
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	<u>Eastern District of Michigan</u>		
Case number (if known)	_____		

☐ Check if this is an amended filing

## Official Form 106Dec

### Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

#### Sign Below

Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms?



No



Yes. Name of person \_\_\_\_\_

Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature  
(Official Form 119).

Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct.

X

/s/ Jamie Christine Denunzio

Jamie Christine Denunzio, Debtor 1

X

\_\_\_\_\_

Date 01/26/2020

MM/ DD/ YYYY

Date \_\_\_\_\_

MM/ DD/ YYYY

Fill in this information to identify your case:

Debtor 1	<u>Jamie</u>	<u>Christine</u>	<u>Denunzio</u>
	First Name	Middle Name	Last Name
<hr/>			
Debtor 2	<hr/>		
(Spouse, if filing)	First Name	Middle Name	Last Name
<hr/>			
United States Bankruptcy Court for the:	<u>Eastern District of Michigan</u>		
<hr/>			
Case number	<hr/>		
(if known)			

☐ Check if this is an amended filing

## Official Form 107

# Statement of Financial Affairs for Individuals Filing for Bankruptcy

04/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

### Part 1: Give Details About Your Marital Status and Where You Lived Before

#### 1. What is your current marital status?

- ☒ Married
- ☐ Not married

#### 2. During the last 3 years, have you lived anywhere other than where you live now?

- ☒ No
- ☐ Yes. List all of the places you lived in the last 3 years. Do not include where you live now.

Debtor 1:	Dates Debtor 1 lived there	Debtor 2:	Dates Debtor 2 lived there
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**Part 2:** Explain the Sources of Your Income

**4. Did you have any income from employment or from operating a business during this year or the two previous calendar years?**

Fill in the total amount of income you received from all jobs and all businesses, including part-time activities.

If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1.

☐ No

☒ Yes. Fill in the details.

	Debtor 1		Debtor 2	
	Sources of income Check all that apply.	Gross Income (before deductions and exclusions)	Sources of income Check all that apply.	Gross Income (before deductions and exclusions)
<b>From January 1 of current year until the date you filed for bankruptcy:</b>	<input type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business		<input type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business	
<b>For last calendar year:</b> (January 1 to December 31, <u>2019</u> ) YYYY	<input checked="" type="checkbox"/> Wages, commissions, bonuses, tips <input checked="" type="checkbox"/> Operating a business	(53.00)	<input checked="" type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business	\$28,723.00
<b>For the calendar year before that:</b> (January 1 to December 31, <u>2018</u> ) YYYY	<input type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business		<input checked="" type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business	\$29,406.00

**5. Did you receive any other income during this year or the two previous calendar years?**

Include income regardless of whether that income is taxable. Examples of *other income* are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1.

☐ No

☒ Yes. Fill in the details.

	Debtor 1		Debtor 2	
	Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of income Describe below.	Gross Income from each source (before deductions and exclusions)
<b>From January 1 of current year until the date you filed for bankruptcy:</b>			Unemployment	\$1,448.00
<b>For last calendar year:</b> (January 1 to December 31, <u>2019</u> ) YYYY	Child Support	\$7,249.68 (approx)	Unemployment	\$6,224.00 (Approx)
<b>For the calendar year before that:</b> (January 1 to December 31, <u>2018</u> ) YYYY	Child Support	\$7,249.68	Unemployment	\$6,224.00

Debtor 1 Jamie Christine Denunzio  
First Name Middle Name Last Name

Case number (if known) \_\_\_\_\_

**Part 3:** List Certain Payments You Made Before You Filed for Bankruptcy

**6. Are either Debtor 1's or Debtor 2's debts primarily consumer debts?**

☐ No. **Neither Debtor 1 nor Debtor 2 has primarily consumer debts.** *Consumer debts* are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,825\* or more?

☐ No. Go to line 7.

☐ Yes. List below each creditor to whom you paid a total of \$6,825\* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

\* Subject to adjustment on 4/01/22 and every 3 years after that for cases filed on or after the date of adjustment.

☒ Yes. **Debtor 1 or Debtor 2 or both have primarily consumer debts.**

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more?

☐ No. Go to line 7.

☒ Yes. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

	Dates of payment	Total amount paid	Amount you still owe	Was this payment for...
Orion Lakes Mobile Home Park Creditor's Name	monthly	\$595.00	\$0.00	<input type="checkbox"/> Mortgage
47 Bluebird Hill Dr Number Street				<input type="checkbox"/> Car
Orion, MI 48359-1807 City State ZIP Code				<input type="checkbox"/> Credit card
				<input type="checkbox"/> Loan repayment
				<input type="checkbox"/> Suppliers or vendors
				<input checked="" type="checkbox"/> Other lot rent

**7. Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider?**

*Insiders* include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony.

☒ No

☐ Yes. List all payments to an insider.

	Dates of payment	Total amount paid	Amount you still owe	Reason for this payment
Insider's Name				
Number Street				
City State ZIP Code				

Debtor 1 **Jamie** **Christine** **Denunzio** Case number (if known) \_\_\_\_\_  
 First Name Middle Name Last Name

**8. Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider?**  
 Include payments on debts guaranteed or cosigned by an insider.

- ☒ No  
☐ Yes. List all payments that benefited an insider.

Dates of payment		Total amount paid	Amount you still owe	Reason for this payment Include creditor's name
Insider's Name				
Number Street				
City State ZIP Code				

#### Part 4: Identify Legal Actions, Repossessions, and Foreclosures

**9. Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding?**

List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes.

- ☐ No  
☒ Yes. Fill in the details.

		Nature of the case	Court or agency	Status of the case
Case title	Galaxy International Purchasing, LLC v Jaimie C. Denunzio	Collection	52-3	<input type="checkbox"/> Pending
			Court Name	<input type="checkbox"/> On appeal
			700 Barclay Cir	<input checked="" type="checkbox"/> Concluded
			Number Street	
			Rochester Hls, MI 48307-4515	
Case number	19-C00083		City State ZIP Code	
Case title	Midland Funding, LLC v Jamie Denunzio	Collection	52-3	<input type="checkbox"/> Pending
			Court Name	<input type="checkbox"/> On appeal
			700 Barclay Cir	<input checked="" type="checkbox"/> Concluded
			Number Street	
			Rochester Hls, MI 48307-4515	
Case number	17-C02198		City State ZIP Code	
Case title	Portfolio Recovery Associates, LLC v Jamie C. Denunzio	Collection	52-3	<input type="checkbox"/> Pending
			Court Name	<input type="checkbox"/> On appeal
			700 Barclay Cir	<input checked="" type="checkbox"/> Concluded
			Number Street	
			Rochester Hls, MI 48307-4515	
Case number	17-C02070GC		City State ZIP Code	



Debtor 1 **Jamie** **Christine** **Denunzio** Case number (if known) \_\_\_\_\_  
 First Name Middle Name Last Name

		Nature of the case	Court or agency	Status of the case
Case title	Portfolio Recovery Associates, LLC v McKenzie, Jamie	Collection	52-3 Court Name 700 Barclay Cir Number Street Rochester Hls, MI 48307-4515 City State ZIP Code	<input type="checkbox"/> Pending <input type="checkbox"/> On appeal <input checked="" type="checkbox"/> Concluded
Case number	16C02764GC			
Case title	Midland Funding LLC v Denunzio, Jamie	Collection	52-3 Court Name 700 Barclay Cir Number Street Rochester Hls, MI 48307-4515 City State ZIP Code	<input type="checkbox"/> Pending <input type="checkbox"/> On appeal <input checked="" type="checkbox"/> Concluded
Case number	16-C00622-GC			
Case title	Chrsitian Financial Credit Union v Denunzio, Jamie	Collection	52-3 Court Name 700 Barclay Cir Number Street Rochester Hls, MI 48307-4515 City State ZIP Code	<input type="checkbox"/> Pending <input type="checkbox"/> On appeal <input checked="" type="checkbox"/> Concluded
Case number	16-C01156-GC			

**10. Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied?**

Check all that apply and fill in the details below.

☐ No. Go to line 11.

☒ Yes. Fill in the information below.

US Department of Education  
 Creditor's Name  
 PO Box 105028  
 Number Street  
 Atlanta, GA 30348  
 City State ZIP Code

Describe the property	Date	Value of the property
2019 Federal Tax Refund Garnishment	4/2019	\$7,000.00
<b>Explain what happened</b>		
<input type="checkbox"/> Property was repossessed. <input type="checkbox"/> Property was foreclosed. <input checked="" type="checkbox"/> Property was garnished. <input type="checkbox"/> Property was attached, seized, or levied.		

Chase Bank  
 Creditor's Name  
 Number Street  
 City State ZIP Code

Describe the property	Date	Value of the property
	past year	\$100.00
<b>Explain what happened</b>		
<input type="checkbox"/> Property was repossessed. <input type="checkbox"/> Property was foreclosed. <input checked="" type="checkbox"/> Property was garnished. <input type="checkbox"/> Property was attached, seized, or levied.		

Debtor 1      **Jamie**      **Christine**      **Denunzio**  
First Name      Middle Name      Last Name

Case number (if known) \_\_\_\_\_

11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt?

- ☒ No  
☐ Yes. Fill in the details.

Describe the action the creditor took		Date action was taken	Amount
Creditor's Name			
Number      Street			
City      State      ZIP Code			
Last 4 digits of account number: XXXX- ____			

12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official?

- ☒ No  
☐ Yes

**Part 5: List Certain Gifts and Contributions**

13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person?

- ☒ No  
☐ Yes. Fill in the details for each gift.

Gifts with a total value of more than \$600 per person	Describe the gifts	Dates you gave the gifts	Value
Person to Whom You Gave the Gift			
Number      Street			
City      State      ZIP Code			
Person's relationship to you _____			

14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity?

- ☒ No  
☐ Yes. Fill in the details for each gift or contribution.

Debtor 1 Jamie Christine Denunzio  
First Name Middle Name Last Name

Case number (if known) \_\_\_\_\_

**Gifts or contributions to charities that total more than \$600**

**Describe what you contributed**

**Date you contributed**

**Value**

Charity's Name

Number Street

City State ZIP Code

**Part 6: List Certain Losses**

**15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling?**

☒ No

☐ Yes. Fill in the details.

**Describe the property you lost and how the loss occurred**

**Describe any insurance coverage for the loss**

Include the amount that insurance has paid. List pending insurance claims on line 33 of *Schedule A/B: Property*.

**Date of your loss**

**Value of property lost**

**Part 7: List Certain Payments or Transfers**

**16. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition?**

Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy.

☐ No

☒ Yes. Fill in the details.

**Description and value of any property transferred**

**Date payment or transfer was made**

**Amount of payment**

Lewis Law, PLLC

Person Who Was Paid

PO Box 775

Number Street

Clarkston, MI 48346

City State ZIP Code

Email or website address

Person Who Made the Payment, if Not You

12/23/2019

\$900.00

Debtor 1 **Jamie** **Christine** **Denunzio** Case number (if known) \_\_\_\_\_  
 First Name Middle Name Last Name

Description and value of any property transferred	Date payment or transfer was made	Amount of payment
CC Advising, Inc Person Who Was Paid 703 Washington Ave. Number Street Bay City, MI 48708 City State ZIP Code Email or website address Person Who Made the Payment, if Not You	12/23/2019	\$9.76

17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors?

Do not include any payment or transfer that you listed on line 16.

- ☒ No  
☐ Yes. Fill in the details.

Description and value of any property transferred	Date payment or transfer was made	Amount of payment
Person Who Was Paid Number Street City State ZIP Code		

18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs?

Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property).

Do not include gifts and transfers that you have already listed on this statement.

- ☒ No  
☐ Yes. Fill in the details.

Description and value of property transferred	Describe any property or payments received or debts paid in exchange	Date transfer was made
Person Who Received Transfer Number Street City State ZIP Code Person's relationship to you _____		

Case number (if known) \_\_\_\_\_

☒ No

☐ Yes. Fill in the details.

Description and value of the property transferred	Date transfer was made

☒ No

☐ Yes. Fill in the details.

Last 4 digits of account number	Type of account or instrument	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
XXXX- _ _ _ _	<input type="checkbox"/> Checking <input type="checkbox"/> Savings <input type="checkbox"/> Money market <input type="checkbox"/> Brokerage <input type="checkbox"/> Other _____	_____	_____

☒ No

☐ Yes. Fill in the details.

Who else had access to it?	Describe the contents	Do you still have it?
<hr/> <p>Name</p> <hr/> <p>Number      Street</p> <hr/> <p>City                      State      ZIP Code</p>		<input type="checkbox"/> No <input type="checkbox"/> Yes

**22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy?**

- ☒ No  
☐ Yes. Fill in the details.

Who else has or had access to it?		Describe the contents	Do you still have it?
Name of Storage Facility _____ Number _____ Street _____ _____ City _____ State _____ ZIP Code _____			<input type="checkbox"/> No <input type="checkbox"/> Yes
Name _____ Number _____ Street _____ _____ City _____ State _____ ZIP Code _____			

**Part 9: Identify Property You Hold or Control for Someone Else**

**23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone.**

- ☒ No  
☐ Yes. Fill in the details.

Where is the property?	Describe the property	Value
Owner's Name _____ Number _____ Street _____ _____ City _____ State _____ ZIP Code _____		
Number _____ Street _____ _____ City _____ State _____ ZIP Code _____		

**Part 10: Give Details About Environmental Information**

**For the purpose of Part 10, the following definitions apply:**

- *Environmental law* means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.
- *Site* means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.
- *Hazardous material* means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.

**Report all notices, releases, and proceedings that you know about, regardless of when they occurred.**

**24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?**

- ☒ No  
☐ Yes. Fill in the details.

Debtor 1 **Jamie** **Christine** **Denunzio** Case number (if known) \_\_\_\_\_  
 First Name Middle Name Last Name

Governmental unit		Environmental law, if you know it	Date of notice
Name of site			
Governmental unit			
Number	Street		
City State ZIP Code			
City State ZIP Code			

25. Have you notified any governmental unit of any release of hazardous material?

- ☒ No  
☐ Yes. Fill in the details.

Governmental unit		Environmental law, if you know it	Date of notice
Name of site			
Governmental unit			
Number	Street		
City State ZIP Code			
City State ZIP Code			

26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.

- ☒ No  
☐ Yes. Fill in the details.

Court or agency	Nature of the case	Status of the case
Case title		<input type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
Court Name		
Number Street		
Case number		
City State ZIP Code		

Debtor 1      Jamie      Christine      Denunzio  
First Name      Middle Name      Last Name

Case number (if known) \_\_\_\_\_

**Part 11:** Give Details About Your Business or Connections to Any Business

**27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business?**

- ☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time
- ☐ A member of a limited liability company (LLC) or limited liability partnership (LLP)
- ☐ A partner in a partnership
- ☐ An officer, director, or managing executive of a corporation
- ☐ An owner of at least 5% of the voting or equity securities of a corporation

☒ No. None of the above applies. Go to Part 12.

☐ Yes. Check all that apply above and fill in the details below for each business.

Describe the nature of the business		Employer Identification number Do not include Social Security number or ITIN.
Name		EIN: _____
Number      Street		
	Name of accountant or bookkeeper	Dates business existed
		From _____ To _____
City      State      ZIP Code		

**28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties.**

☒ No

☐ Yes. Fill in the details below.

Date issued	
Name	MM / DD / YYYY
Number      Street	
City      State      ZIP Code	



Debtor 1      Jamie      Christine      Denunzio  
First Name      Middle Name      Last Name

Case number (if known) \_\_\_\_\_

**Part 12:** Sign Below

I have read the answers on this *Statement of Financial Affairs* and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

**X** \_\_\_\_\_  
/s/ Jamie Christine Denunzio  
Signature of Jamie Christine Denunzio, Debtor 1

Date 01/26/2020

**X** \_\_\_\_\_  
Signature of \_\_\_\_\_

Date \_\_\_\_\_

Did you attach additional pages to your *Statement of Financial Affairs for Individuals Filing for Bankruptcy* (Official Form 107)?

☒ No

☐ Yes

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

☒ No

☐ Yes. Name of person \_\_\_\_\_

Attach the *Bankruptcy Petition Preparer's Notice, Declaration, and Signature* (Official Form 119).

Fill in this information to identify your case:

Debtor 1	<u>Jamie</u>	<u>Christine</u>	<u>Denunzio</u>
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	_____	_____	_____
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	<u>Eastern District of Michigan</u>		
Case number (if known)	_____		

☐ Check if this is an amended filing

## Official Form 108

# Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form.

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

### Part 1: List Your Creditors Who Have Secured Claims

1. For any creditors that you listed in Part 1 of *Schedule D: Creditors Who Have Claims Secured by Property* (Official Form 106D), fill in the information below.

Identify the creditor and the property that is collateral	What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C?
Creditor's name: _____	<input type="checkbox"/> Surrender the property.	<input type="checkbox"/> No
Description of property securing debt: _____	<input type="checkbox"/> Retain the property and redeem it.	<input type="checkbox"/> Yes
	<input type="checkbox"/> Retain the property and enter into a <i>Reaffirmation Agreement</i> .	
	<input type="checkbox"/> Retain the property and [explain]: _____	

Debtor 1      Jamie      Christine      Denunzio  
First Name      Middle Name      Last Name

Case number (if known) \_\_\_\_\_

**Part 2:** List Your Unexpired Personal Property Leases

For any unexpired personal property lease that you listed in *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 106G), fill in the information below. Do not list real estate leases. *Unexpired leases* are leases that are still in effect; the lease period has not yet ended. You may assume an unexpired personal property lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2).

Describe your unexpired personal property leases	Will the lease be assumed?
--	----------------------------

Lessor's name:      Orion Lakes Mobile Home Park	<input type="checkbox"/> No
	<input checked="" type="checkbox"/> Yes

Description of leased property:      Lot rent for mobile home

Lessor's name:	<input type="checkbox"/> No
----------------	-----------------------------

Description of leased property:	<input type="checkbox"/> Yes
---------------------------------	------------------------------

Lessor's name:	<input type="checkbox"/> No
----------------	-----------------------------

Description of leased property:	<input type="checkbox"/> Yes
---------------------------------	------------------------------

Lessor's name:	<input type="checkbox"/> No
----------------	-----------------------------

Description of leased property:	<input type="checkbox"/> Yes
---------------------------------	------------------------------

Lessor's name:	<input type="checkbox"/> No
----------------	-----------------------------

Description of leased property:	<input type="checkbox"/> Yes
---------------------------------	------------------------------

Lessor's name:	<input type="checkbox"/> No
----------------	-----------------------------

Description of leased property:	<input type="checkbox"/> Yes
---------------------------------	------------------------------

Lessor's name:	<input type="checkbox"/> No
----------------	-----------------------------

Description of leased property:	<input type="checkbox"/> Yes
---------------------------------	------------------------------

**Part 3:** Sign Below

Under penalty of perjury, I declare that I have indicated my intention about any property of my estate that secures a debt and any personal property that is subject to an unexpired lease.

X \_\_\_\_\_  
/s/ Jamie Christine Denunzio  
Signature of Debtor 1

X \_\_\_\_\_  
Signature of Debtor 2

Date 01/26/2020  
MM/ DD/ YYYY

Date \_\_\_\_\_  
MM/ DD/ YYYY

**IN THE UNITED STATES BANKRUPTCY COURT  
EASTERN DISTRICT OF MICHIGAN  
DETROIT DIVISION**

IN RE: **Denunzio, Jamie Christine**

CASE NO

CHAPTER 7

**VERIFICATION OF CREDITOR MATRIX**

The above named Debtor hereby verifies that the attached list of creditors is true and correct to the best of his/her knowledge.

Date 01/26/2020 Signature /s/ Jamie Christine Denunzio  
Jamie Christine Denunzio, Debtor

Advance America  
1626 N Perry St  
Pontiac, MI 48340-3310

AFNI, Inc.  
PO Box 3517  
Bloomington, IL 61702

Alliance One Receivables  
Management  
4850 E Street Rd Suite 300  
Trevose, PA 19053-6600

Bankcard Services  
Po Box 84049  
Columbus, GA 31908-4049

Barclay Card Services  
P.O. Box 8803  
Wilmington, DE 19899

Barclays Bank Delaware  
Po Box 8803  
Wilmington, DE 19899-8803

C.U. Recovery  
26263 Forest Blvd  
Wyoming, MN 55092-8033

Capital One  
26525 N Riverwoods Blvd  
Mettawa, IL 60045-3440

Capital One Bank  
Po Box 3004  
Phoenixville, PA 19460-0919

Capital One Bank USA  
15000 Capital One Drive  
Henrico, VA 23238

Carson Smithfield, LLC  
PO Box 9216  
Old Bethpage, NY 11804

Chase Bank  
PO Box 659732  
San Antonio, TX 78265

Christian Financial  
18441 Utica Road  
Roseville, MI 48066

Christian Financial Credit  
Union  
35100 Van Dyke Ave  
Sterling Hts, MI 48312-3553

Comcast Cable  
PO Box 7500  
Southeastern, PA 19398

Comenity Bank/Victorias  
Secret  
Po Box 182782  
Columbus, OH 43218-2782

Convergent Outsourcing  
800 SW 39th St.  
PO Box 9004  
Renton, WA 98057

Crown Asset Management,  
LLC  
3100 Breckinridge Blvd Ste 725  
Duluth, GA 30096-7605

D & A Services  
1400 E Touhy Ave Ste G2  
Des Plaines, IL 60018-3338

David J. Canine  
30150 Telegraph Rd Ste 444  
Bingham Farms, MI 48025-4549

Joseph James Denunzio, Jr  
46 Bluebird Hill Dr  
Orion, MI 48359-1807

Jamie Christine Denunzio  
46 Bluebird Hill Dr  
Orion, MI 48359-1807

Dinning & Greve, PLLC  
18441 Utica Rd Ste A  
Roseville, MI 48066-4202

Elizabeth Smith,  
Po Box 2044  
Warren, MI 48090-2044

ERC  
Po Box 23870  
Jacksonville, FL 32241-3870

Financial Recovery Services,  
Inc  
PO Box 385908  
Minneapolis, MN 55438

Fingerhut  
PO Box 166  
Newark, NJ 07101

Galaxy International  
Purchasing, LLC  
4730 S Fort Apache Rd Ste 300  
Las Vegas, NV 89147-7947

Genpact Services LLC  
PO Box 1969  
Southgate, MI 48195-0969

Great American Finance Co.  
20 N Wacker Dr Ste 2275  
Chicago, IL 60606-3096

Great Lakes Borrower  
Services  
Po Box 7860  
Madison, WI 53707-7860

Home Depot Credit Services  
PO Box 790328  
Saint Louis, MO 63179



KOHL'S DEPARTMENT STORE

Po Box 3043  
Milwaukee, WI 53201-3043

Lewis Law, PLLC

PO Box 775  
Clarkston, MI 48346

Lowe's/Synchrony Bank

PO Box 965005  
Orlando, FL 32896

Merrick Bank

Po Box 30537  
Tampa, FL 33630-3537

Michigan Department of  
Attorney General

G. Mennen Williams Building  
7th Floor 525 W. Ottawa St.  
Po Box 30212  
Lansing, MI 48909-7712

Michigan Department of  
Treasury

Third Party Withholding Unit  
Po Box 30785  
Lansing, MI 48909-8285

Midland Funding LLC

Po Box 1628  
Warren, MI 48090-1628

Midland Funding, LLC

Elizabeth Smith, Andrew Perry, Stephanie  
Pettway, Omar Najor  
PO Box 2044  
Warren, MI 48090-2044

N.A.R., Inc.  
1600 W 2200 S Ste 410  
W Valley City, UT 84119-7240

Nationwide Credit, Inc.  
Po Box 26314  
Lehigh Valley, PA 18002-6314

Northland Group, Inc.  
PO Box 309846 Mail Code GLXD86  
Minneapolis, MN 55439

Northstar Locations Services,  
LLC  
Attn: Financial Services Dept  
4285 Genesee St  
Cheektowaga, NY 14225-1943

Orion Lakes Mobile Home  
Park  
47 Bluebird Hill Dr  
Orion, MI 48359-1807

PennCredit Corporation  
2800 Commerce Drive  
Harrisburg, PA 17110

Phillips & Cohen Associates,  
Ltd  
Mail Stop: 147 1002 Justison Street  
Wilmington, DE 19801-5147

Pioneer  
26 Edward St  
Arcade, NY 14009-1012

PORTFOLIO RECOVERY  
ASSOC

PO Box 12914  
Norfolk, VA 23541

Portfolio Recovery  
Associates, LLC  
3250 W Big Beaver Rd Ste 124  
Troy, MI 48084-2902

Portfolio Recovery  
Associates, LLC  
c/o Weber & Olcese, P.L.C.  
3250 W Big Beaver Rd Ste 124  
Troy, MI 48084-2902

QVC  
PO Box 530905  
Atlanta, GA 30353

Target Card Services  
PO Box 660170  
Dallas, TX 75266

U.S. Department of Education  
National Payment Center  
Po Box 790336  
Saint Louis, MO 63179-0336

U.S. Trustee  
211 W Fort St Ste 700  
Detroit, MI 48226-3263

United Recovery Systems  
5800 N Course Dr  
Houston, TX 77072-1613

Walmart/Synchrony Bank  
Po Box 530927  
Atlanta, GA 30353-0927

Weber & Olcese, P.L.C.  
3250 W. Big Beaver Road Suite 124  
Troy, MI 48084

**UNITED STATES BANKRUPTCY COURT FOR  
THE EASTERN DISTRICT OF MICHIGAN**

In Re: **Denunzio, Jamie Christine**

Debtor(s).

Case No. \_\_\_\_\_

Chapter \_\_\_\_\_

**7**

Hon. \_\_\_\_\_

**STATEMENT OF ATTORNEY FOR DEBTOR(S)  
PURSUANT TO F.R. BANKR.P. 2016(b)**

The undersigned, pursuant to F.R.Bankr.P. 2016(b), states that:

1. The undersigned is the attorney for the Debtor(s) in this case.
2. The compensation paid or agreed to be paid by the Debtor(s) to the undersigned is: [Check one]  
☒ **FLAT FEE**
  - A. For legal services rendered in contemplation of and in connection with this case, exclusive of the filing fee paid \_\_\_\_\_ **\$900.00**
  - B. Prior to filing this statement, received \_\_\_\_\_  
\$900.00
  - C. The unpaid balance due and payable is \_\_\_\_\_  
\$0.00☐ **RETAINER**
  - A. Amount of retainer received \_\_\_\_\_
  - B. The undersigned shall bill against the retainer at an hourly rate of \_\_\_\_\_ [Or attach firm hourly rate schedule.] Debtor(s) have agreed to pay all Court approved fees and expenses exceeding the amount of the retainer.
3. \$0.00 of the filing fee has been paid.
4. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including: [Cross out any that do not apply.]
  - A. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;
  - B. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required;
  - C. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;
5. By agreement with the debtor(s), the above-disclosed fee does not include the following services:  
\_\_\_\_\_
6. The source of payments to the undersigned was from:
  - A. ☐ Debtor(s)' earnings, wages, compensation for services performed
  - B. ☒ Other (describe, including the identity of payor) \_\_\_\_\_
7. The undersigned has not shared or agreed to share, with any other person, other than with members of the undersigned's law firm or corporation, any compensation paid or to be paid except as follows:  
\_\_\_\_\_

Dated: 01/26/2020

/s/ Lashonda S. Bourgeois-Lewis  
Lashonda S. Bourgeois-Lewis, Attorney for the Debtor(s)

Agreed: /s/ Jamie Christine Denunzio

Jamie Christine Denunzio, Debtor